United Nations

A/S-21/PV.1

General Assembly

Twenty-first Special Session

Official Records

1st plenary meeting

Wednesday, 30 June 1999, 10 a.m.
New York

President: Mr. Opertti . . . . (Uruguay)

The meeting was called to order at 10.15 a.m.

Item 1 of the provisional agenda

Opening of the session by the Chairman of the delegation of Uruguay

The Temporary President (*spoke in Spanish*): I declare open the twenty-first special session of the General Assembly.

Item 2 of the provisional agenda

Minute of silent prayer or meditation

The Temporary President (*spoke in Spanish*): I now invite representatives to stand and observe one minute of silent prayer or meditation.

The members of the General Assembly observed a minute of silent prayer or meditation.

Scale of assessments for the apportionment of the expenses of the United Nations (A/S-21/3)

The Temporary President (*spoke in Spanish*): I should like, in keeping with the established practice, to invite the attention of the General Assembly to document A/S-21/3, which contains a letter addressed to the President of the General Assembly from the Secretary-General in which he informs the Assembly that 32 Member States are in arrears in the payment of their financial contributions to the United Nations within the terms of Article 19 of the Charter.

I should like to remind delegations that, under Article 19 of the Charter,

> "A Member of the United Nations which is in arrears in the payment of its financial contributions to the Organization shall have no vote in the General Assembly if the amount of its arrears equals or exceeds the amount of the contributions due from it for the preceding two full years."

May I take it that the General Assembly duly takes note of the information contained in document A/S-21/3?

It was so decided.

Item 3 of the provisional agenda

Credentials of representatives to the twenty-first special session of the General Assembly

(a) Appointment of the members of the Credentials Committee

The Temporary President (*spoke in Spanish*): Rule 28 of the rules of procedure provides that the General Assembly, at the beginning of each session, shall appoint, on the proposal of the President, a Credentials Committee consisting of nine members.

This record contains the original text of speeches delivered in English and interpretations of speeches delivered in the other languages. Corrections should be submitted to original speeches only. They should be incorporated in a copy of the record and be sent under the signature of a member of the delegation concerned, *within one month of the date of the meeting*, to the Chief of the Verbatim Reporting Service, Room C-178. Corrections will be issued after the end of the session in a consolidated corrigendum.

In accordance with precedents, and as recommended by the Commission on Population and Development acting as the preparatory committee for the twenty-first special session of the General Assembly, the Credentials Committee of the twenty-first special session should have the same membership as that of the fifty-third regular session of the General Assembly — namely China, Fiji, Jamaica, Mali, New Zealand, the Russian Federation, the United States of America, Venezuela and Zimbabwe.

If there is no objection, I shall consider the Credentials Committee constituted accordingly.

It was so decided.

The Temporary President (*spoke in Spanish*): In this connection, I draw the attention of the members of the Assembly to a note verbale from the Secretary-General, dated 27 May 1999, in which it was stated that credentials should be issued for all representatives to the special session, in accordance with rule 27 of the rules of procedure of the General Assembly. I would therefore urge those members that have not yet done so to submit the credentials of their representatives to the Secretary-General as soon as possible.

Item 4 of the provisional agenda

Election of the President

The Temporary President (*spoke in Spanish*): The preparatory committee recommends that the twenty-first special session should take place under the presidency of the President of the General Assembly at its fifty-third regular session, Mr. Didier Opertti, Minister for Foreign Affairs of Uruguay.

I take it that the Assembly wishes to elect Mr. Opertti President of the General Assembly at its twenty-first special session by acclamation.

It was so decided.

The Temporary President (*spoke in Spanish*): I extend my sincere congratulations to Mr. Didier Opertti and invite him to assume the presidency.

I request the Chief of Protocol to escort the President to the podium.

Mr. Opertti took the Chair.

Statement by Mr. Didier Opertti, President of the General Assembly at its twenty-first special session

The President (*spoke in Spanish*): Allow me first to express gratitude for my election.

This special session is being held at a doubly important time in world history, as, on one hand, we are on the brink of a new century and a new millennium and, on the other hand, we are poised to welcome with joy the 6 billionth citizen of the world.

I deliberately use the expression "welcome with joy", for what kind of world would this be if we were not joyful at the birth of a new being, if we did not celebrate the birth of a child? Whoever this child is and wherever he or she is born, we wish the child good fortune, we congratulate the parents and we hope that the newborn will enjoy good health, prosperity and a long life.

There are several reasons to believe that, upon reaching a world population of 6 billion, the newborn child could be more fortunate than his predecessors; the one born in 1930, when the world population was 2 billion; the one born in 1960 when the world population was 3 billion; the one born in 1974, when the world population was 4 billion; and the one born in 1987, when the world population was 5 billion.

Indeed, infant mortality has never been so low. Life expectancy has never been longer. There has never been such wealth in the world, and never have so many people shared in it. Never have there been so many well-educated, well-nourished and well-housed people. School enrolment has never been so high, particularly in primary and secondary education. However, despite all this progress that can be shown by objective statistics, we face serious problems of social integration and marginalization that are embedded in cultural, political and economic factors. The inequalities appear to increase objectively as well as subjectively and are accompanied by a widespread sense of deprivation.

However, we also know that there are other reasons to be concerned. We hope that the child whose birth will mark a world population of 6 billion will be able to take advantage of all the positive factors and progress cited earlier. However, it is necessary to remember that of the 2,100 children born this morning in the time it takes me to make this statement, 1,995 will be born in the poorest countries of the world and most probably to a poor family.

For these children and for their parents, prospects are rather gloomy. In the developing countries as a whole, life expectancy is shorter, the infant mortality rate is higher and income certainly lower than in the industrialized countries. At the same time, income distribution is grossly unequal. For the least developed countries, prospects are even bleaker.

We are here today to continue working dauntlessly to eliminate or at least to mitigate these inequalities and make our contribution to that end. Our main concern is to achieve economic and social development for all countries, based on equity and equality of gender, human rights and social justice. We all know that only by establishing stable conditions of sustained and sustainable development, and by ensuring that all people can reasonably benefit from or share in its benefits, can we secure in the next century the peace that has eluded us in this century.

We do not have only one obligatory choice for development. Thinking of the way towards a more equal and just society does not imply a unique set of universal policies. Instead, we must develop a deep understanding of diverse values and beliefs without losing sight of the common objectives of all humanity. We must be culturally oriented in facing problems of development. Indeed, population problems cannot be resolved mechanically from a single, universal and abstract perspective. Rather, we must carefully study the cultural and social environment of newborns in their various societies in order to promote a reliable, comprehensible and sustainable strategy to achieve certain goals. There will not be an appropriate way to address world problems if the establishment of policies is not accompanied by the study of each culture.

During the decade of the 1990s, the United Nations has become decisively involved in this area and has convened a series of conferences where many of these problems have been addressed. The recommendations of those conferences, taken together, establish the foundations for progress in many areas, especially in social development. Since the holding of these conferences, countries and the international community have been working together towards the agreed goals.

This special session of the General Assembly has been convened to study and to evaluate the progress made in one particular area, that of population and development. At the 1994 International Conference on Population and Development, attended by 179 Member States, consensus was reached on a Programme of Action which is both comprehensive and specific. That Programme of Action contains a broad statement of principles as well as specific operative recommendations for action.

The Programme of Action begins by stating the fundamental understanding that each country has the sovereign right to apply the recommendations of the Programme in accordance with its national laws and its development priorities, with full respect for the various religious, ethical and cultural values of its people, which constitute the essence of the human being, and in a manner compatible with internationally established and recognized human rights.

The 15 principles of the Programme of Action are a very clear statement of the basis of the consensus. They are as valid today as they were when the countries of this Organization agreed upon them five years ago. The Programme of Action itself was the fruit of discussions held not merely during the few days of the International Conference on Population and Development, but in the months, even years, before the Conference. It reflects the considered views of all the Member States that were involved in the process. The Programme of Action was extensively quoted and relied upon in the discussions leading up to this special session, and I am sure it will prove equally reliable in the years ahead.

The Conference itself was the culmination of a long process of activities and discussion which may be said to have begun 25 years ago with the World Population Conference, held at Bucharest in 1974. Its roots go even further back, to the very beginning of the United Nations, with the establishment of the Population Commission and of the Population Division to service it. Programmes of action date from the beginning of the activities of the United Nations Population Fund (UNFPA), 30 years ago, in 1969.

I mention this background only to show that population issues have deep and tenacious roots in the United Nations system. Over the last quarter-century, through an exhaustive and inclusive process of dialogue and discussion and through programmes of action and international cooperation, population has become part of the global dialogue on economic and social development. It has become part of every country's political thinking and planning. In relative terms, action on population and development issues has improved the lives of our citizens; it has strengthened not only individuals, but families, communities and nations.

To this end, the Programme of Action of the International Conference on Population and Development set goals to be implemented within five, 10 and 20 years in key areas of population and development: reproductive health; maternal and infant mortality; life expectancy; education, specifically the gender gap in education; and, most crucial, the resources, and the allocation of resources, to help achieve these goals.

Members decided to convene this special session to review progress towards these goals and towards implementing the other recommendations made in the Programme of Action. Our common aim is to continue to build on what we agreed upon at the Conference. We have years of experience behind us; it will all go into the discussions of the next few days.

Since 1994, countries have made excellent progress towards the agreed goals. Policies have been reviewed and changed, and new policies have been adopted. Legal frameworks have been reviewed. There is more enthusiasm for enforcing existing constitutional, legal and administrative protections and ensuring that they truly afford protection, notably in the area of gender equality and equity. Services have been reorganized and reformed. New partnerships between Government and civil society have been formed, and have been firmly entrenched at the very core of the issue. Of course, there has also been a redistribution of resources, and it has been necessary to find new resources.

In any case we find agreement on the Programme of Action. There is discussion, of course, about the best way to proceed while preserving and protecting its values and principles. There is discussion on resources and on principles. This session will certainly contribute to that discussion.

I therefore call on all countries to review the resources they allocate to this issue at the domestic level, as well as those they can devote to the implementation of international agreements. The child who will be the six billionth human being deserves the best the modern human family has to offer.

I welcome all participants to the United Nations, and I wish them every success in achieving the most tangible results possible in their discussions over the next few days.

I call now on the Secretary-General.

The Secretary-General: The Cairo Conference — the International Conference on Population and Development — whose fifth anniversary we are marking today, was not an isolated event. It was an integral part of the series of great conferences held by the United Nations during the 1990s. I am sure I do not need to remind the Assembly of the themes of those conferences: the global environment, human rights, population, social development, women, and human settlements. Those were distinct topics, but they were all related to each other and to one central, overarching aim: development — development of nations, and development of people.

And all those conferences aimed to reach that goal through an organized, yet voluntary effort: a collective effort on a global scale; an effort by sovereign States and civil society working together; an effort guided by a common approach based on universal values and principles which we all could accept.

So Cairo was not just a population conference. It was a conference on population and development. It was part of a process, going back 25 years or more, during which we have all learned that every society's hopes of social and economic development are intimately linked to demography. All States now understand that if they are to provide adequately for the future health and education of their citizens, they need to incorporate population policies into their development strategy.

Abundant research has shown us that economic growth and development have profound effects on fertility, on the size of families, on the age pyramid, and on patterns of migration. And we hardly need research to tell us that living conditions at the local level — the family and the village — are reflected in the national standard of living. In other words, demography and development are constantly interacting. It seems blindingly obvious now, but until Cairo the world did not fully understand it.

Since Cairo, the world does understand it; and it understands, too, that we have to stabilize the population of this planet. Quite simply, there is a limit to the pressures our global environment can stand. Patterns of consumption are one form of pressure, but another is the sheer size of the world's population, and a third is the way it is distributed around the globe.

That is the global dimension. But there is also an individual dimension. Every human being aspires to health, security and dignity. That is the essence of human rights. And we now realize that sexual and reproductive health is an essential part of those rights.

Do not we all recognize as universal the anguish of the individual who loses a wife or mother in childbirth because proper care is not available; of the teenager whose options in life are suddenly foreclosed, because she gets pregnant and drops out of school; of the woman who has to go on having children, even though she knows her health is at risk; or of the refugee who has been raped but is too frightened, or too ashamed, to ask for help?

Better understanding of these issues has brought real change in the daily life of millions of people. They now have wider choices, and can make key decisions about their own lives. Let me give some examples of how things have changed since the first Population Conference, 25 years ago. Then, women in developing countries had an average of five children each; today they have fewer than three. Then, 30 per cent of couples used family planning; today, 60 per cent do so — and the vast majority of Governments now support it. Then, 140 out of every 1,000 babies born alive would die during childhood; now, only 80 will. Then, average life expectancy was 59 years; now, it is 66. And in many countries, fewer women now die in childbirth, although reliable statistics on this are hard to come by and it is certainly an area where much needs to be done.

Meanwhile, at the global level, the rate of growth of the world's population has slowed dramatically, from 2 per cent to 1.3 per cent per year. In another 25 years it should be down to 0.8 per cent.

We are still adding 78 million to our numbers every year, but that figure, too, should decline, at first slowly and then, in the second decade of the century, quite steeply.

All that is good news, for which every nation in the world can take some credit. States have acted on internationally agreed principles and on their own national priorities and values. Most of them have achieved slower, more balanced population growth, not by coercion but by enhancing individual freedom.

We can all be proud that this has been achieved with the help of international consensus and cooperation under United Nations auspices. We should also acknowledge that it was not done by States alone. Non-governmental organizations and other parts of civil society made a big contribution. They spread the word. They lobbied for policy changes. They mobilized people to support national initiatives.

So have we done all that the Cairo Conference recommended? No, my friends, there is still much to do. In too many countries, girls still do not have the same chance to be educated as boys. Too many women still cannot choose when or whether to become pregnant. Too many women are victims of sexual violence, especially during conflict. Too many women resort to abortions that are not safe. Too many are still subjected to genital mutilation and other harmful traditional practices. Too many men remain ignorant of, or indifferent to, their responsibility for their family and its reproductive health.

Too many people are still exposed to sexually transmitted diseases; too many countries are being ravaged by the spread of AIDS; people in developing countries still die too young — as they do in the former communist countries, in some of which life expectancy has actually declined — and so on.

The stakes could hardly be higher. If only we could implement the Cairo Programme in full, we could make a tremendous difference to human rights, to hopes of prosperity and to the sustainable use of natural resources.

We must do it. But we cannot do it without funds. In Cairo, everyone agreed on the need to mobilize new financial resources, from within developing countries and also from the international community. Since then, developing countries have proved their commitment. But they are cruelly limited in what they can achieve without outside help. Too often — let us admit it — they are also limited by the effects of conflicts, arms spending or inadequate leadership.

But too often, also, they have to give priority to debt servicing, or to Draconian budgetary austerity imposed in the name of structural adjustment. In all cases, it is the people who suffer. They are entitled to expect more sympathy and better treatment from countries which are more fortunate.

I know that it is easier said than done. Even rich countries contain many poor people, and their Governments face many competing claims. But what could be more important than the chance to help the world's people control their numbers through greater prosperity and wider choice?

We can do it. Thanks to Cairo, we now know how to do it. Let us all reaffirm the pledges we made in Cairo. In the next few days, specific proposals will be put before the Assembly. They are the fruit of five years' experience, and are based firmly on the principles agreed in the Cairo Programme.

This special session gives us a unique chance to face up to what is undoubtedly one of the great challenges — perhaps the greatest challenge — of the coming century. You are meeting in the right place — the United Nations, the world's only truly global forum. We in the Secretariat and in the United Nations Population Fund, are here to help you. I wish you success in your deliberations. I wish us all success in the next five years in implementing the Cairo Programme.

The President (*spoke in Spanish*): I thank the Secretary-General for his statement.

Item 5 of the provisional agenda

Report of the Commission on Population and Development acting as the preparatory committee for the twenty-first special session of the General Assembly (A/S-21/2 and Add.1 and 2)

The President (*spoke in Spanish*): I give the floor to the Chairman of the Commission on Population and Development acting as the preparatory committee for the twenty-first special session of the General Assembly, His Excellency Mr. Anwarul Karim Chowdhury of Bangladesh.

Mr. Chowdhury (Bangladesh), Chairman of the Commission on Population and Development acting as the preparatory committee for the twenty-first special session of the General Assembly: It is with great pleasure that I take the floor to present the report of the Commission on Population and Development acting as the preparatory committee for the special session of the General Assembly on the review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD), contained in the official documents of this session in document A/S-21/2 and Add.1 and Add.2.

The Commission on Population and Development, acting as the preparatory committee for the special session, held the first part of its session from 24 March to 1 April 1999. Informal consultations were subsequently held from 6 to 8 May. The preparatory committee held its resumed session from 24 to 29 June to finalize its work.

The preparatory committee was open-ended to allow the full participation of all States and observers. A number of United Nations bodies, specialized agencies, intergovernmental organizations represented by observers and a large number of non-governmental organizations participated in these sessions.

The preparatory committee devoted its time mostly to negotiating the main substantive document on the basis of a working paper submitted by the Chairman that contained proposals for key future actions for further implementation of the Programme of Action of the ICPD.

During the protracted negotiations in the sessions of the preparatory committee, as well as in the May informals, our deliberations were very fruitful and, at the same time, difficult and extremely strenuous, with the pace of progress often getting bogged down. However, the sincere efforts and firm commitment of delegations to working together to reach a consensus helped us to overcome many of the apparently insurmountable difficulties.

In the end, the outcome was very positive. There has been substantial and substantive progress achieved, as reflected in our documents. We were able to reach consensus on most of the text, including sections dealing with vitally important issues, such as gender equality and empowerment of women, the need for a gender perspective, reproductive health, maternal mortality and morbidity, HIV/AIDS issues, resource partnership and collaborations, as well as macroeconomic issues. Despite our intense efforts, a few paragraphs of the main document remain outstanding. We are working on them and this will continue in the Committee of the Whole of this session. Please note that paragraphs 53 and 55 of A/S-21/2/Add.2 have been agreed upon since the document was accepted by the preparatory committee last night.

The ICPD Programme of Action is a very well-balanced text. It was a turning point in our approach to issues of population and development. It has guided population policies and programmes over the last five years and will continue to do so for many years to come.

The topics in the document kept the delegations intensely engaged. The attendance was always full. This resulted in a substantive, rich and full discussion of all conceivable aspects of the issues. I am happy to say that we have not only reviewed the implementation of the Programme of Action of Cairo, but also substantially enriched the understanding and deepened the consensus through a process of prolonged and constructive engagement. We should be proud of the progress we have made in the substantive aspects of the document.

I have already mentioned that reaching an agreement was difficult more often than not. My efforts were greatly aided by the Bureau, which was of immense help in working with key delegations to arrive at a text agreeable to all. My heartfelt thanks go to my colleagues from Brazil, Canada, Finland, Ghana, Jamaica, Japan, Romania and Uganda, who served with me in the Bureau.

The Executive Director of the United Nations Population Fund, Mrs. Nafis Sadik, was of immense help and support in our deliberations. Her excellent team was of great assistance in our work. I would also like to record my appreciation to those in the Secretariat who have worked tirelessly to facilitate the process in so many ways.

The President (*spoke in Spanish*): I thank the Chairman of the Commission of Population and Development acting as the preparatory committee for the twenty-first special session of the General Assembly for his statement. The General Assembly is, of course, grateful to him and to those who participated in the preparatory committee for their efforts to get this special session off to a good start.

Item 6 of the provisional agenda

Organization of the session

Draft decision II (A/S-21/2)

The President (*spoke in Spanish*): Members are invited to turn to draft decision II recommended by the preparatory committee in paragraph 35 of its report, contained in document A/S-21/2.

Draft decision II is entitled "Organizational arrangements for the twenty-first special session of the General Assembly". May I take it that the General Assembly wishes to adopt draft decision II?

Draft decision II was adopted.

The President (*spoke in Spanish*): On the basis of the decision just taken by the General Assembly on the recommendations of the preparatory committee, the following arrangements shall apply to the twenty-first special session:

The Vice-Presidents of the twenty-first special session shall be the same as those of the fifty-third regular session of the General Assembly.

The Vice-Presidents of the fifty-third regular session are the representatives of the following Member States: Brunei Darussalam, Cameroon, China, France, Georgia, Germany, Lesotho, Liberia, Morocco, Myanmar, Nicaragua, the Russian Federation, San Marino, Senegal, Suriname, the Syrian Arab Republic, Turkmenistan, Uganda, the United Kingdom of Great Britain and Northern Ireland, the United States of America and Yemen.

If there is no objection, I shall take it that the representatives of those States are elected Vice-Presidents of the twenty-first special session of the General Assembly.

It was so decided.

The President (*spoke in Spanish*): Regarding the Chairmen of the Main Committees of the twenty-first special session, the Chairmen of the Main Committees of the fifty-third regular session shall serve in the same capacity at the special session.

The Chairmen of the Main Committees at the fifty-third regular session are the following: the Chairman of the Special Political and Decolonization Committee (Fourth Committee), Mr. Pablo Macedo of Mexico; the Chairman of the Second Committee, Mr. Bagher Asadi of the Islamic Republic of Iran; the Chairman of the Third Committee, Mr. Ali Hachani of Tunisia; the Chairman of the Fifth Committee, Mr. Movses Abelian of Armenia; and the Chairman of the Sixth Committee, Mr. Jargalsaikhany Enkhsaikhan of Mongolia.

If there is no objection, I take it that the Assembly decides to elect these representatives Chairmen of the Main Committees at the twenty-first special session.

It was so decided.

The President (*spoke in Spanish*): As concerns the First Committee, in the absence of its Chairman, Ms. Akmaral Arystanbekova of Kazakhstan, Vice-Chairperson of the First Committee, will be Acting

Chairperson of the Committee for the duration of the special session.

In adopting the recommendations of the preparatory committee, the Assembly has established an ad hoc committee of the whole, which will be designated as Ad Hoc Committee of the Whole of the Twenty-first Special Session.

In accordance with the recommendations of the preparatory committee just adopted by the General Assembly, the Chairman of the Ad Hoc Committee of the Whole will be a full member of the General Committee of the twenty-first special session.

Concerning the election of the Chairman of the Ad Hoc Committee of the Whole, the preparatory committee recommends that its Chairman, Mr. Anwarul Karim Chowdhury of Bangladesh, serve in the same capacity in the Ad Hoc Committee of the Whole.

I take it that it is the wish of the Assembly at its twenty-first special session to elect him Chairman of the Ad Hoc Committee of the Whole by acclamation.

It was so decided.

The President (*spoke in Spanish*): I congratulate His Excellency Mr. Anwarul Karim Chowdhury on behalf of the General Assembly, and on my own behalf, and wish him well in the important and onerous responsibilities that he has just assumed.

The General Committee of the twenty-first special session of the General Assembly has now been fully constituted.

We turn now to matters concerning the participation of speakers other than Member States in the work of the special session.

On the basis of the decision just taken by the General Assembly, observers may make statements in the debate in the plenary.

States members of the specialized agencies of the United Nations that are not Members of the United Nations, namely, the Cook Islands, the Holy See, Kiribati, Nauru, Niue, Switzerland, Tonga and Tuvalu, may participate in the work of the twenty-first special session in the capacity of observers.

Associate members of the regional commissions, namely, American Samoa, Anguilla, Aruba, the British Virgin Islands, the Cook Islands, French Polynesia, Guam, Hong Kong China, Macau, Montserrat, the Netherlands Antilles, New Caledonia, Niue, the Commonwealth of the Northern Mariana Islands, Puerto Rico and the United States Virgin Islands may participate in the special session, in the same capacity of observer that held for their participation in the 1994 International Conference on Population and Development.

Representatives of the United Nations system may make statements in the Ad Hoc Committee of the Whole.

In view of time constraints, representatives of non-governmental organizations may make statements in the Ad Hoc Committee of the Whole.

In accordance with the decision just adopted by the General Assembly, there will be nine plenary meetings over the three-day period, with three meetings per day: from 10 a.m. to 1 p.m., from 3 p.m. to 6 p.m. and from 7 p.m. to 9 p.m. In view of the large number of representatives already inscribed on the list of speakers for the debate in the plenary, I should like to inform members that I intend to start the plenary meetings punctually at 10 a.m., 3 p.m. and 7 p.m. In this connection, I would like to assure the Assembly that I shall be in the Chair punctually at the scheduled time. I sincerely hope that all delegations will make a special effort to cooperate in this regard.

With regard to the length of statements in the debate in the plenary, I should like to remind representatives that, on the basis of the decision just adopted by the Assembly, statements in the debate should not exceed seven minutes. In connection with the time limits, a light system has been installed at the speakers' rostrum which functions as follows: a green light will be activated at the start of the speaker's statement; an orange light will be activated 30 seconds before the end of the seven minutes; a red light will be activated when the seven-minute limit has elapsed. I should like to appeal to speakers in the debate in the plenary to cooperate in observing the time limits of their statements, so that all those inscribed on the list of speakers for a given meeting will be heard at that meeting.

I should now like to draw the attention of representatives to a matter concerning the participation of Palestine, in its capacity as observer, in the sessions and work of the General Assembly. Members will recall

Assembly resolution 52/250 of 7 July 1998 and its annex, as well as a note by the Secretary-General contained in document A/52/1002 that outlines the Secretary-General's understanding of the implementation of the modalities annexed to the resolution. I should like to draw attention in particular to paragraph 6 of the annex to resolution 52/250, which reads as follows:

> "The right to make interventions, with a precursory explanation or the recall of relevant General Assembly resolutions being made only once by the President of the General Assembly at the start of each session of the Assembly."

Accordingly, for the twenty-first special session of the General Assembly, the observer of Palestine will therefore participate in the work of the General Assembly in accordance with General Assembly resolution 3237 (XXIX) of 22 November 1974, resolution 43/177 of 15 December 1988 and resolution 52/250 of 7 July 1998, with no further need for a precursory explanation prior to any intervention by Palestine in this special session.

Item 7 of the provisional agenda

Adoption of the agenda

The President (*spoke in Spanish*): The provisional agenda of the twenty-first special session of the General Assembly is contained in document A/S-21/2, which has been recommended for adoption by the preparatory committee as draft decision I in paragraph 35 of its report. In order to expedite its work, the Assembly may wish to consider the provisional agenda directly in plenary meeting without referring it to the General Committee.

May I take it that the General Assembly agrees to this procedure?

It was so decided.

The President (*spoke in Spanish*): May I take it then that the Assembly wishes to adopt the provisional agenda as it appears in document A/S-21/2?

It was so decided.

The President (*spoke in Spanish*): Regarding the allocation of items, it is recommended that while all items will remain allocated to the plenary, agenda item 8, entitled "Overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development", will also be allocated to the Ad Hoc Committee of the Whole of the twenty-first special session for consideration, on the understanding that the debate on the item shall take place in plenary meeting.

May I take it that the Assembly wishes to adopt this proposal?

It was so decided.

The President (*spoke in Spanish*): Under agenda item 8, the Ad Hoc Committee of the Whole will consider the proposals for key actions for the further implementation of the Programme of Action of the International Conference on Population and Development, the text of which is to be found in document A/S-21/2/Add.2.

Agenda item 8

Overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development

The President (*spoke in Spanish*): The General Assembly will first hear a statement by His Excellency Mr. Alberto Fujimori, President of the Republic of Peru.

President Fujimori (*spoke in Spanish*): As never before in the history of mankind, the issues of population and development are closely intertwined. This linkage is of decisive importance for all developing countries and takes on dramatic proportions for the poorest among them. For that reason I attended, as head of State, the Beijing Conference on Women. And while I was in very excellent company, I felt strange being the only male president there.

There is no doubt that the gap between poor and rich countries has continued to increase, contrary to the supposed logic that we all espouse: that of globalized growth. We are not questioning the basis and economic premises of globalization, but it is only prudent to warn of the serious implications of the lack of social results to match the serious situation which a large part of the earth's peoples are experiencing.

This is how in the non-developed world the vicious circle of poverty-unwanted children-poverty is gaining strength. We have to break this circle definitively through realistic population policies with macroeconomic foundations that allow the necessary stability for sustained national development and the parallel rational demographic policies. Such policies are rational because they engage citizens' rational faculties and their freedom to decide without the State's attempting in any way to impose coercive methods.

Not everything can be done at the same time or as fast as we would like. The logical choice, therefore, is to use scarce resources appropriately and productively to achieve the greatest number of national objectives. In this way we may achieve a virtuous circle of prosperity-a family that can be taken care of-prosperity.

In the developing countries, basic services such as health, education and security are still, unfortunately, scarce and inadequate. For such time as States cannot realistically redress this situation and provide these basic services in greater quantity and quality, we have to provide couples with information so that they can decide, freely, what size their families are to be, in keeping with their resources, so that they can practise responsible parenthood.

Without information, couples would have unwanted children that they cannot maintain, that is, that they cannot feed and educate properly, leading to adolescents without a future who — and allow me these harsh words — will become victims of social disgraces such as prostitution or delinquency.

Allow me now to turn to the case of Peru. Our country has had an explicit national population policy since 1995, that is, since the Cairo Conference, and we have strengthened our institutional capability and increased coverage and quality of reproductive and family health services.

Concerning the reproductive health targets, our country has achieved an appreciable degree of development in coverage since 1993, and has succeeded in bringing such services to an ever-increasing number of people. In 1993, the number of couples who opted to use contraception was 340,000. Three years later, with the beginning of the reproductive health programme, coverage of 610,000 couples using modern methods had been achieved, and in 1999, about a million couples had access to the programme. In other words, we have almost tripled coverage in barely 6 years.

I wonder, if there are so many couples wanting, first, information and, secondly, support from the State, should the State hold itself aloof from the majority of its citizens to spare itself criticism and attacks? The logical answer has to be no, because it is the State's obligation to meet those demands. And the answer is again no when, in full view of and with total forbearance from the very ones who criticize, middle- and upper-class women do have access to the information and services those critics would deny women in the lower classes.

The overall fertility rate has been going down for a number of years now as women have had increasing access to a higher level of education. In Peru 30 years ago, the overall fertility rate was six children per women, whereas five years ago it was 3.4. Now the figure is down to 3 per woman. These indicators are intimately related to those for infant mortality, which are falling sharply, and the population growth rate, which was 2.8 per cent per annum in the 1970s and 2.1 per cent at the beginning of the 1990s, has now fallen to 1.8 per cent.

The fundamental objective of the programme is to put the most appropriate information and methods within the reach of our people so that they can achieve their reproductive ideal. In Peru, 64 per cent of married and cohabiting women do not want any more children, and 23 per cent want to space out their pregnancies. I repeat: why should they not have access to information if they want it? One expression of the unmet demand for information is the high number of abortions, which are prohibited in my country but nevertheless are performed. Conservative figures estimate the number of abortions at about 250,000 a year, which is a considerable number when compared with 610,000 births each year. Many of these abortion cases result in serious complications and unfortunately end in the death of the woman as the outcome of an obviously unwanted pregnancy. And this situation is surely repeated in the world's underdeveloped countries.

Mortality rates in Peru are among the highest in the western hemisphere, and contraceptive methods, whether natural or artificial, therefore become and important factor for preventing maternal deaths in our country. The programme has clearly worked, despite its detractors, and we would have made even more progress if those detractors had not put so many stumbling blocks in the way. Not only have we had to battle against established customs and the preachings of a number of conservative sectors, we also — although this may be difficult to believe — have had to deal with a number of non-governmental organizations which, when they did not get the budgetary support they expected, joined the campaign being waged by some parts of the media and certain political sectors and, betraying their principles, acted in opposition to the reproductive health programmes.

Isolated cases, which we regret and which have not recurred, concerning the AQV, voluntary surgical contraception, were blown out of proportion; and people began to talk about massive sterilization and create an uproar with the aim of doing political damage to the Government, by telling the world it was eliminating the poor and the Indians. Even some North American Congressmen joined the campaign, lending it strength. The percentages of morbidity and mortality in the Peruvian voluntary surgical contraception programme are within international standards. I therefore do not know what to say about this campaign. I cannot find the right words.

Nonetheless, the results achieved have had other positive repercussions at the social level, including interest in gender equity and the consideration of State policies to promote and improve the situation of women. During recent years, this interest in gender equity has been gaining strength among the highest authorities of various countries of the world, which has allowed for a strengthening of the process of overcoming gender inequities between men and women, improving the access of women to education, economic and labour activity, participation in political life and improved health care. In that regard, reduction of the illiteracy rate, mainly the female illiteracy rate, should be one of our basic objectives.

However, the State, women's organizations and human rights organizations need to continue to work forcefully in their efforts to eliminate violence against women and violence within the family. This problem of the health and citizens' security should be given adequate attention and prevented. Measures adopted worldwide through the establishment of social networks and broadly representative forums are becoming one relevant element of society's response to all forms of violence against women and the family.

The concept in vogue today is globalization. However, strangely, it does seem to apply to the rights of women, as if women should live isolated from the course of history. In every country, adolescents constitute an important sector of the population with a greater and greater need for information and education in sexual and reproductive health.

The greatest successes in this field will be reached through activity in education and in preventing unwanted pregnancies, sexually transmitted diseases, such as AIDS, and risky behaviour, such as violence and drug addiction. The State should also ensure access for adolescents to quality reproductive health services for the prevention of unwanted pregnancy as a right enshrined in all programmes of actions worldwide. I am convinced that only through timely education which covers a society as a whole will we be able to obtain positive results on population and make it a real agent of change for development.

Peru recognizes that the points of the Programme of Action adopted at the Cairo Conference on Population and Development constitute the basis of international population policies, on the basis of which each country has the right to determine its implementation in accordance with its national laws and development priorities. Compatible and effective development and population policies will mean greater well-being and the gradual elimination of threat looming over the dignity of some peoples.

We cannot see women solely in the context of their beautiful procreative function. Women have the right to develop themselves fully, in parallel to national development, and thus contribute to national development. I therefore reiterate the imperative need to bravely, decisively and nationally to end the vicious circle of poverty-unwanted children-poverty to arrive at the virtuous circle of prosperity-a family that can be taken care of prosperity. We would then be seeing the first light at the end of the tunnel of discrimination against women.

The President (*spoke in Spanish*): I thank the President of the Republic of Peru for his statement.

The Assembly will now hear a statement by Mr. Gustavo Bell Lemus, Vice-President of the Republic of Colombia.

Mr. Bell Lemus (Colombia) (*spoke in Spanish*): It is my honour and privilege as Vice-President of Colombia to address this historic session of the General Assembly. It constitutes an important opportunity to give new impetus to the efforts by the international community in the field of population and development, which are vital for humankind.

In 1994, at the Cairo Conference, we committed ourselves to implement an ambitious Programme of Action, aimed at addressing the challenges of world population growth and managing such growth in accordance with the economic and social development needs of our countries.

Today, five years later, we can recognize with satisfaction the progress made and also the long way still to go. The universal principles and ethical values that inspired the Cairo Conference have helped us both as a fundamental guide for action and as an incentive to face those challenges. Yet we need a new political impulse, a profound commitment, so as to ensure that the high ideals we all share will be translated into practical results and better living conditions for huge sectors of the world's population.

The Government of Colombia has committed itself to a great effort to achieve social change. Our national development plan, "Change to Build Peace", is based on this development perspective, and its main goal is to consolidate a lasting peace based on social justice. Population policies occupy a special priority place within this plan. Colombia has made significant achievements in population stabilization. Over the last few decades we have been able to reduce population growth considerably. Decreased fertility rates and better health care and disease prevention have helped to achieve greater life expectancy. The infant mortality rate in Colombia is notably lower than the world average.

Such factors as the provision of reproductive health services, active cooperation between Government and non-governmental organizations, the role of women in society, the promotion of gender equity and equality, respect for reproductive and sexual rights and increased access to education and information have been decisive in those achievements.

The National Constitution of Colombia contains clear provisions on reproductive rights, and our Parliament has adopted social security laws based on these concepts. Furthermore, the national development plan outlines specific actions to consolidate reproductive and sexual health programmes, within a clear gender perspective. In Colombia, all norms and political decisions in this field have been adopted within the framework agreed upon at the Cairo Conference.

Today, Colombia ranks third in Latin American and the Caribbean in population size. It stands out at the international level owing to its progress in achieving a demographic transition. We have surpassed almost all thresholds agreed upon at Cairo. Colombia is also one of the leading countries in the developing world in the area of South-South cooperation on population matters. We have participated actively in the Partners in Population and Development programme. In implementing that initiative, and thanks to the combination of national efforts and international support, we are providing cooperation to other countries through training programmes on reproductive and sexual health. Direct participation of the non-governmental sector in these activities has been an important factor for success.

Of course we still have many challenges to overcome. For that reason, I would like to reaffirm my country's commitment to the objectives adopted at Cairo, as well as to the additional actions we will agree upon during this special session of the General Assembly. Colombia's population policy framework will remain consistent with those goals and with economic and social development requirements. Achievements in this demanding field do not depend only on our domestic efforts. Support by the international community is crucial, especially through the mobilization of financial resources, human-resources development and institutional capacity-building.

In the view of Colombia, the document that will be adopted at the end of this session will be an important platform to reinforce the momentum and deepen the political will towards fulfillment of the goals of the Programme of Action. Allow me to underline in this connection some considerations that we believe are essential to ensuring the successful implementation of the Programme.

First, we must stress the formulation of population policies as a basic component of development strategies. While recognizing its demographic dimension and its importance from the human health perspective, it is essential that future action in this area be undertaken in the broader context of commitments entered into in the spheres of international cooperation and sustainable development. Hence, highest priority should be accorded actions aimed at compensating for the social impact of the recent international financial crisis, particularly in the fields of education, health and population programmes.

Second, legitimate and universally accepted results cannot be attained without clear policies and concrete results on international migration. Restrictions in this area are one of the most serious, unjustified and still unexplained imbalances in the globalization process.

Third, it is necessary to remove the economic and social barriers that prevent the full enjoyment of reproductive and sexual rights and of sexual health, something that is indispensable for guaranteeing effective population policies based on gender equality and equity.

Fourth, we must adopt more decisive measures for adolescents and elderly people. The former constitute a powerful resource for the future development of our countries; the future of world reproductive health lies in their hands. And elderly people form an increasing proportion of the world population and now need greater attention and keener social awareness than before.

Fifth, to reduce maternal mortality rates requires a decisive collective commitment and wider international support. Urgent action is required to improve women's health and nutrition, reduce the number of unwanted pregnancies and guarantee safe and effective family planning methods.

Sixth, action aimed at strengthening cooperation between governmental and non-governmental actors should also be strengthened. Active participation by non-governmental organizations will be increasingly important in achieving successful implementation of the Programme of Action.

Seventh, the international community must increase its support for South-South cooperation efforts. The results achieved through the Partners in Population and Development programme constitute a positive experience which merits firm support.

Finally, we must restore the credibility of the Cairo Programme of Action by mobilizing international financial resources, an area in which the results fall far short of the expectations aroused by commitments that had been undertaken. In this context, it is absolutely imperative that resources for the United Nations Population Fund be increased.

As we approach the new century, when the world population is only weeks from reaching the historic 6 billion mark, and in the midst of the silent revolution of the demographic transition of the past several decades, it is time for the international community to promote further actions and to strengthen its leadership and determination. It is time for action. The decisions to be adopted at this session will affect the quality of life of generations to come. Let us not hesitate to assume this noble political commitment.

The President (*spoke in Spanish*): I thank the Vice-President of the Republic of Colombia for his statement.

I now call on Her Excellency Mrs. Valentina I. Matvienko, Deputy Prime Minister of the Russian Federation.

Mrs. Matvienko (Russian Federation) (*spoke in Russian*): The International Conference on Population and Development, held at Cairo, gave a powerful impetus to the world community, including Russia, to work towards the formulation and implementation of comprehensive policies in this sphere. In the five years since Cairo, certain results have been achieved at the global level in such key areas as the reduction of maternal and infant mortality, improvements in reproductive health and better access to education. We recognize the important role played here by the United Nations Population Fund (UNFPA), the central body in United Nations activities in this area.

But it is clear that in terms of a number of specific indicators, the pace of progress remains unsatisfactory. In our view, this is largely connected with other unresolved problems, including the social costs of macroeconomic reform and the grave global consequences of the financial crises in Asia, Latin America and Russia over the past two years. The complexity of the phenomenon of globalization and the insufficient mobilization of resources for population activities jeopardize the attainment of the Cairo objectives.

It is therefore important to increase the attention that is paid to the social components of economic development and to put the human person — human dignity, human rights, economic and spiritual potential and, most important, life and health — at the centre of national and international policies. These key elements should be a part of the concept of peace in the twenty-first century that the President of the Russian Federation, Boris Yeltsin, has proposed be formulated.

We are convinced that guaranteeing peaceful conditions for development is the sine qua non for progress in the implementation of the Cairo Programme of Action. For several months the world witnessed a war in the Balkans — a region of the world that, in economic terms, is relatively prosperous — in which the vital social infrastructure and human potential of a sovereign State were deliberately destroyed. The scale of the damage to tens of thousands of houses, thousands of schools and hundreds of health care institutions, including hospitals and polyclinics, is now being assessed. The health of the people of Yugoslavia and the condition of its environment have been jeopardized, and the development potential of that country has been undermined.

That unprecedented humanitarian crisis will require vast resources and many years of effort to end the suffering of the people and restore to them a peaceful life. Unless these problems are swiftly resolved, primarily by the contributions of those who bear the blame for the bombing, any talk about global responsibility for population and development issues is meaningless.

Russia is fully committed to the spirit and objectives of the Cairo Conference. Guided by the Cairo principles, the Government is pursuing a purposeful population policy. State approaches to the resolution of demographic problems have been fundamentally adjusted.

The conditions in which the Government is operating, as is known, are far from simple. Like a number of other countries with economies in transition, Russia is facing serious demographic problems, which emerged during the market reforms of the 1990s. The mortality rate remains high, especially among men of working age, and the birth rate remains low, as a result of which the size of the population is continuing to decrease. Life expectancy has gone down. The health of Russian citizens is deteriorating, especially among children and young people. Infectious diseases, including sexually transmitted diseases, have been spreading at an increasing rate. There is an acute problem of forced migration, especially labour migration, which is often illegal.

In order to overcome those negative trends, the Government has started to prepare concrete measures, both short term and long term, on the basis of the concept of a programme of action to resolve the demographic crisis in the Russian Federation, which was elaborated last year. Our main priorities are to reduce mortality rates, improve health services, provide acceptable living standards and increase social protection.

The Government of Russia is devoting serious attention to the protection of reproductive health and is promoting comprehensive preventive measures in this area, including a universal system for the ultrasound screening of women's reproductive systems. As a result, we have to some extent stabilized the infant mortality rate, although it remains unacceptably high.

Since 1994 the implementation of the presidential programmes on family planning and safe motherhood has made it possible to reduce the total number of abortions by almost one third and to achieve a reduction in abortion-related maternal mortality rates of more than 20 per cent. To a large extent, such changes were made possible by the active involvement of non-governmental organizations in resolving the problem.

The national policies with regard to the family, women and children are being implemented in a consistent manner. The national plans of action for children and the advancement of women, which were approved by the President of Russia, are being implemented. The provisions of the Family Code of the Russian Federation are being put into practice. These stress, in particular, guarantees of the rights of children, including the provision of a general education and protection against abuse and violence in the family.

The State is trying to guarantee the interests of the elderly, who constitute a growing segment of Russian society and are its most vulnerable group. To that end a federal programme, entitled "A Senior Generation", is being implemented. Long-term benchmarks have been established for social policies for the elderly.

Russia's State migration policy is facing the challenge of regulating migration flows, mitigating the negative consequences of unregulated migration and creating conditions for the implementation of policies to recognize the rights of migrants and ensure the humane treatment of people seeking asylum in Russia. An active component of this policy is the improvement of the situation and the protection the rights of our compatriots abroad.

One of the main obstacles to implementing Russia's population and development policy is the lack of public funding to finance necessary socio-demographic programmes. We need to find new sources of funding and mobilize both domestic and external resources. In this context, an important role is to be played by international cooperation. The mobilization of external support for Russia's reforms with regard to population is more important than ever. We look forward to increased assistance in these areas, both from traditional bilateral partners and from multilateral organizations, including the United Nations system.

We attach great importance to the growing cooperation with the United Nations Population Fund

(UNFPA). It is important to ensure that cooperation with multilateral organizations be based on broad-based partnership with civil society, including non-governmental organizations, the private sector, academia and local authorities in Russia's regions. Given the similarity of many problems and objectives, we would favour a more active regional approach by United Nations bodies to such cooperation which could, for example, cover the needs of interested countries of the Commonwealth of Independent States and Central and Eastern Europe.

In conclusion, I should like to express the hope that the proposals for key actions for the further implementation of the Programme of Action of the International Conference on Population and Development, to be adopted at this special session of the General Assembly, will make a real practical contribution to resolving the global problem of population in all its multifaceted aspects.

During the course of my short, seven-minute statement, thousands of new lives have been brought into the world. Let us wish those children prosperity and happiness in this world.

The President (*spoke in Spanish*): I now call on His Excellency Mr. Wang Zhongyu, State Counsellor of China.

Mr. Wang Zhongyu (China) (*spoke in Chinese*): First of all, on behalf of the Chinese delegation and on my own behalf, I wish to extend my congratulations to you, Mr. President, on your assumption of the presidency of the General Assembly at the current special session. The Chinese delegation will work with you and with other delegations to make this special session a complete success.

Since the convening of the International Conference on Population and Development (ICPD) five years ago, the international community and various Governments have made relentless efforts to implement the ICPD Programme of Action. Encouraging progress has been made in improving the status of women, increasing access to education and lowering the birth rate, maternal mortality rate and infant mortality rate. All of these efforts have contributed to promoting the social and economic development of countries and improving their people's health and welfare.

In the meantime, we have also noted that we still have a long way to go before achieving the goals defined in the ICPD Programme of Action. In some countries and regions, economic crisis, natural disasters, regional wars and conflicts, as well as a lack of resources have seriously hindered progress in the implementation of the Programme of Action. Therefore, we believe that it was necessary and timely to convene the current special session of the General Assembly to reiterate the principles and spirit of the Programme of Action, summarize past experiences and lessons and explore ways and means to solve existing problems.

As the most populous developing country in the world, China has made the population issue a strategic one and integrated it into its overall programme of national socio-economic development. Since the Cairo Conference, the Chinese Government has given high priority to the implementation of the Programme of Action, formulated the National Family Planning Programme of China and set long-term goals for its population and family-planning work. The Government sees sustainable development as a major strategic principle and views the population issue in a broader perspective. China's population and family-planning programme places greater emphasis on the integrated approach of waging publicity and education campaigns, providing quality services in reproductive health and family planning, and bringing into play the roles of civil society and non-governmental organizations. We are opposed to coercive measures. Special attention has been given to combining the family-planning programme in the rural areas with economic development, poverty-alleviation, universal access to education, improving of women's status and transforming outdated family concepts.

China's population and family-planning programme has not only stabilized China's population and facilitated its socio-economic development, but also greatly contributed to the stabilization of the world population. At the same time, we are aware of the fact that China still faces daunting challenges in terms of population and development. The annual population growth of 12 million people has placed tremendous pressure on our socio-economic development, resource utilization, environmental protection and education and health services. It has also created many new problems.

I wish to take this opportunity to elaborate briefly on the principled position of the Chinese Government on the further implementation of the Programme of Action.

First of all, the Chinese Government believes that the issue of population goes hand in hand with that of development. The population issue should be considered and addressed in the light of a country's national conditions and socio-economic development. Efforts should be made to develop a coordinated relationship between population growth and socio-economic development, resource utilization and environmental protection so as to achieve sustainable development. The Chinese Government respects human rights in the field of population and development. We believe that, when we talk about protecting human rights, what comes first are the rights to subsistence and development of all nations and peoples. Development is the basis for promoting and protecting human rights. Without this basis, human rights are devoid of any real meaning.

Secondly, international cooperation in the implementation of the ICPD Programme of Action should be undertaken in full respect for the sovereignty of each country. The differences in economic development levels, history and cultural traditions, religious beliefs and moral values of each country should be taken into full consideration. Overlooking such differences will make the goals defined in the Programme of Action unattainable.

Thirdly, effective resource mobilization is the key to the implementation of the Programme of Action. We appeal to the international community, especially the developed countries, to honour the commitments made at the Cairo Conference to providing financial assistance to developing countries and helping them to overcome their difficulties. China hopes that, at this special session, action-oriented proposals will be put forward to solve this problem.

We hope that this special session will provide us with a golden opportunity to advance the full implementation of the Programme of Action and with a new starting point for international cooperation in the field of population and development. The Chinese Government and people stand ready to join all the Governments and peoples of the world in contributing to world peace and human progress.

The President (*spoke in Spanish*): I now give the floor to His Excellency The Honourable Kwamena Ahwoi, Minister of Local Government and Rural Development of Ghana.

Mr. Ahwoi (Ghana): It is my honour and privilege to make this statement on behalf of the Republic of Ghana.

Even before the Cairo Conference in 1994, Ghana had revised its population policy and anticipated in many material respects the goals, principles and strategies recommended by the International Conference on Population and Development (ICPD). The end product, while emphasizing issues relating to adolescents, youth, women, the aged and persons with disabilities, also incorporated such emerging issues as the environment and the threat of HIV/AIDS. It represents the collective determination and commitment of the people to the principle that a well-managed population is a fundamental requirement for sustainable development.

The post-ICPD era has been for Ghana one of continuity in the sense that relevant areas of past policies have been reinforced, while other areas have witnessed changes meant to address new concepts and issues. The ultimate objective is a people-centred development policy, which will create opportunities for all Ghanaians to realize their full potential through the exercise of meaningful choices.

The general policy environment within which we are implementing our Revised Population Policy and the ICPD Programme of Action has been considerably enhanced by the Government's blueprint for socio-economic transformation, entitled "Vision 2020: The First Step", which sets out the medium- and long-term goals, targets and strategies required to transform Ghana into a middle-income economy by 2020.

The decentralization of both political power and responsibility for planning as a means of promoting community involvement in all aspects of the development process is now a critical strategy to ensure that population concerns are fully integrated into district- and subdistrict-level planning, as well as programme activities.

The objective is to take full account of population variables in planning and policy-making at the district level, where it matters most. It is in this respect that my Government attaches the utmost importance to the population and housing census to be conducted early next year — the first in 16 years. Indeed, plans are almost complete for a trial census next month.

A vastly improved legal and policy environment has ensured that the necessary laws have been passed and other consequential measures taken to promote gender equality, equity and the empowerment of women. Female genital mutilation has been outlawed. The practice of confining girls in shrines as a punishment for "crimes" committed by members of their families has been criminalized.

In active collaboration with the Parliamentary Caucus on Population and Development, the search continues for such other areas of law and policy as are in need of reform. An affirmative action policy recently approved by the Cabinet, among other things, commits the Government to ensuring 40 per cent of political representation for women and their appointment to various bodies.

In order to achieve the desired change in behaviour, attitudes and practice, we will continue to engage in constant advocacy and consensus-building by fostering and maintaining strategic partnerships and functional linkages with non-governmental organizations, youth and women's groups and community and opinion leaders, especially traditional rulers and religious leaders, as well as the private sector.

Appropriate policy guidelines have been developed to guide programme implementers in the field of reproductive and sexual health as well as reproductive rights. We have integrated reproductive health into our primary health care and referral systems. In addition, a full range of basic reproductive health services is provided at these levels.

We recognize the right of individuals and couples to plan their families. Consequently, strategies, including information and education, have been designed to generate demand for the fullest possible range of family-planning methods. A campaign for the use of long-term family-planning methods is being actively waged.

The identified high-risk HIV/AIDS age group of 20 to 35 years has been targeted for special attention. The national response to the epidemic is being comprehensively reviewed and a draft national policy is in the course of preparation. A draft policy on ageing is also being prepared.

Ghana is determined to implement the International Conference on Population and Development Programme of Action to the letter, and in this regard we are committing as many resources as we can to the social sector. However, we face serious resource constraints as a result of policies that we are having to implement to ensure macroeconomic stability and, more significantly, as a result of the unsustainable external debt repayment terms and diminished economic potential arising from problems of market access. The impact of these is to further constrain our ability to deal with problems encountered in the implementation of the Programme of Action. These problems include shortage of trained manpower, inequitable distribution of health service staff, inadequate access to services, especially in rural areas, and negative socio-cultural beliefs and practices. Permit me to emphasize that without significant improvement in the external environment for trade, debt-servicing and debt repayment, our efforts will not lead to the targets agreed in the Programme of Action, even if our partners do more to meet the agreed official development assistance targets and their commitments in the Programme of Action.

We are committed to undertaking these activities because they serve the best interests of our people, and we would implement them even without the Programme of Action. The Programme of Action, however, offers a partnership, shared interests and opportunities, which enhance our capacity to achieve our goal of sustainable human development within our limited resources.

It is our hope, therefore, that the entire review process will lead to a renewal of commitments made in Cairo and, where circumstances dictate, as indeed is the case in a number of areas, to even greater commitment.

The President: I now give the floor to His Excellency Mr. Jerzy Kropiwnicki, Minister, Member of the Council of Ministers of the Republic of Poland.

Mr. Kropiwnicki (Poland): May I begin by congratulating you, Sir, on your election to the responsible post of President of the General Assembly at its twenty-first special session. The session is an important world event, as it is the evidence of the appreciation of the international community for the activities aimed at the versatile development of nations and States. I am convinced that the present debate will make it possible to assess the effectiveness of the implementation of the Cairo Programme of Action and specify methods of further activity without the need to alter the wording of the Programme.

The Government of the Republic of Poland is guided by the universal values contained in the Programme of Action of the International Conference on Population and Development — Cairo '94 — in its efforts towards dynamic economic development and social transformations. Referring to these values and to its Constitution, Poland has undertaken complex social reforms. For the Polish nation, these undertakings are designed to tackle the tasks of the twenty-first century.

Demographic tendencies in Poland in the twenty-first century will bring challenges that should be met by our economy, which is still in the process of transformation. They concern most of all conditions of family development and job security, the health condition of the population and the durability of intergenerational bonds in an ageing society. At present, we are experiencing a declining level of generational replacement. The population's process of ageing is mainly a result of the rapid drop in the fertility rate.

The health condition of Poland's population was addressed by the adoption of the National Health Programme. I would like to express profound gratitude to the United Nations Population Fund for the financial support that permitted Poland to start very important research programmes concerning health promotion through the educational system and the protection of the health of mother and child.

In 1999, the Government started the National Programme for Counteracting Drug Addiction and the National Programme for Preventing HIV Infection and Care for AIDS-Infected Persons. The Environment and Health strategic programme has adopted World Health Organization recommendations. A project of efficient management in the health service system has been implemented thanks to a World Bank loan.

In 1998, the Government of the Republic of Poland adopted a report on the situation of Polish families. It states unequivocally that only families can secure the optimal conditions for generational renewal and their biological, psychological and social development. The report says that the consolidation of the foundations of family functioning is the duty of the State.

The effort of working out and implementing a programme of State pro-family policy was undertaken on the basis of these premises. The effort embraces such issues as, first, creation of solutions strengthening the material foundation of family functioning; secondly, protection of motherhood, health of infants and children in the growing stage; thirdly, bringing up the young generation to respect the right to life as well as social human rights; fourthly, promotion of a culture of responsible procreation. These activities are already being implemented.

Women and mothers have a special role in the family. Women devoted to motherhood and family life should have the opportunity to realize their own social aspirations, and those choosing a professional career should have the possibility of squaring it with family life and motherhood. The equal rights of women and men are guaranteed by the Constitution of the Republic of Poland. Non-governmental women's organizations have been operating on a broad scale.

Senior citizens can and should have a place in the family and society. We should therefore search for solutions that will allow us to preserve our society's intergenerational bonds and solidarity. We hope that the system of pension insurance currently being created in Poland will do its job in material terms: it has an element of saving for old age and therefore serves to help consolidate an attitude of financial prudence. Also, cultivation of family bonds will promote respect for senior citizens and ensure greater use of their experience and wisdom in social life.

A comprehensive, modern type of education that prepares for life and work in society is a prerequisite for the development of every human being and for the progress of civilization. The programmes and organizational reforms on which we have embarked, and the necessary increase in public spending, should enable us to educate our young people in secondary and higher education to levels already achieved in the European Union countries. These reforms are based on methods already being practised in Western countries.

Poland is becoming an increasingly attractive country for immigrants. Its international migration policy has been shaped in line with the relevant international conventions and agreements. Thus, Poland recently accepted a group of refugees from Kosovo to the limit of its capacity. The Constitution of the Republic of Poland makes provision for foreigners to enjoy political asylum there. The legislation regulating the various aspects of international migration will be further shaped with a view to Poland's acceding to the European Union.

In conclusion, I would like to stress that Poland's representatives participate actively in international forums on assessing implementation of the Programme of Action of the Cairo International Conference on Population and Development.

Poland is undertaking a number of programmes which, despite the difficulties of the transformation period, should accelerate the development of our country, and it counts on the continuing support of the United Nations in its endeavours. At the same time we declare our readiness to cooperate with the Organization in its quest for peace and prosperity in the world.

The President (*spoke in Spanish*): I now call on Ms. Brigitte Zypries, Vice-Minister, Federal Ministry of the Interior of Germany.

Ms. Zypries (Germany): I have the honour to speak on behalf of the European Union. The Central and Eastern European countries associated with the European Union — Bulgaria, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Romania, Slovakia and Slovenia — and the associated country Cyprus align themselves with this statement.

Let me first of all express our appreciation for the excellent work done by the Population Division under the leadership of Mr. Chamie, and for the great effort and dedication which has been invested in the review exercise by the United Nations Population Fund (UNFPA) under the untiring guidance of Mrs. Sadik. Allow me also to add a word of heartfelt thanks to our excellent Chairman of the preparatory committee, Mr. Chowdhury, who led us through the difficult negotiations on the document containing the key future actions for the further implementation of the Programme of Action. The European Union appreciates the hard and focused work and the spirit of cooperation and compromise of all concerned, and is convinced that the final product will bear witness to that work and spirit.

One of the major achievements of the consensus reached at Cairo in 1994 was and is the recognition that measures and policies concerning population issues have to be based on respect for human rights and fundamental freedoms and must be oriented towards people's well-being. The concept of reproductive rights and reproductive and sexual health is based on this consensus and on the recognition that only free, responsible and informed decisions by human beings can be the keystone of and guidelines for government action in this field.

The European Union has noted with satisfaction that the Programme of Action has led to appropriate action in many countries, and that policies and programmes have been either newly introduced or changed to conform to the Cairo principles. Even though the concept of reproductive rights and reproductive and sexual health is by now firmly entrenched and widely acknowledged, much still needs to be done to create an environment that enables people, and in particular women and poor people, not only to make those free and informed choices but also to act on them.

The European Union's position in preparing for this special session has been forward-looking. The European Union is giving priority to stronger calling for action in the field of HIV/AIDS and strengthening the focus on, and meeting, the particular needs of adolescents for confidential and comprehensive services in sexual and reproductive health and sex education. It is giving priority also to calling for stronger action to reduce maternal mortality, and to achieve gender equality and equity. It is drawing attention also to the issues of migration and refugees, population ageing and resources to fund the necessary actions.

The HIV/AIDS pandemic developed in a much faster and much more dramatic way than could have been foreseen at the Cairo Conference. The death toll among young adults in their most productive years and on children, who are the future of every country, is appallingly high in too many countries: social and economic development in such countries is being severely jeopardized. Prevention of HIV infection is therefore urgently required. The key future actions proposed in this respect, particularly the targets of lower infection rates to be reached, are extremely pertinent.

Campaigns for the use of condoms, combined with sexual education, were quite successful and curbed the infection rate in countries of the European Union. Adolescents are particularly vulnerable to HIV and other sexually transmitted diseases. Female adolescents are also being unnecessarily exposed to unwanted pregnancies, curtailing their prospects for good personal development. Their resort to abortion could be reduced if adolescents had information about and access to reproductive and sexual health services. Experience and knowledge acquired or rejected during adolescence are decisive for reproductive decisions in the future. Adolescents should therefore have full information on responsible sexual behaviour, equitable gender roles and family life. They should also have full access to reproductive and sexual health services with confidential and sympathetic counselling.

Making motherhood safe is essential for women's health and survival and for the survival of their children. Indeed, motherhood and childhood are entitled to special care under the Universal Declaration of Human Rights. Increased efforts must be made to reduce the risks involved in pregnancy and delivery, which are alarmingly high in developing countries as compared to developed countries.

The achievement of gender equity and equality, empowerment of women and gender-sensitive male attitudes remains an important priority for further action. In this context, the reproductive and sexual health and reproductive rights of women — while no longer disputed in principle — still need to be fully implemented. This presents one of the major challenges for future action. Also, it should not be forgotten that the Fourth World Conference on Women, in Beijing, built upon the Cairo Programme of Action and took the matter of women's rights to sexual self-determination and health yet further ahead. Let us therefore take these developments into account when proceeding in a truly integrated manner with the follow-up to Cairo and the other major United Nations conferences.

The European Union wishes to underline the importance it attaches to the sexual and reproductive health and reproductive rights of migrants, internally displaced persons and refugees, with particular attention to the situation of women.

The growth in the number of older persons as a proportion of the overall population creates new challenges. Changing family structures and living arrangements will make it increasingly necessary to relieve families of the burden of being principal care providers for the elderly.

Governments have the responsibility to assign more importance to population and development issues. Political commitment has been identified as one of the factors for progress in implementing the Programme of Action. The mobilization of international resources, however, is needed to support the efforts of national Governments. The European Union urges that efforts be strengthened towards the fulfilment of the agreed official development assistance target of 0.7 per cent of gross national product and that the share of official development assistance for population assistance should be increased.

On 12 October of this year the world population will reach 6 billion. Decisive action by all concerned is needed to help us cope with the challenges confronting the global community in the approaching century. The Programme of Action recognizes the interlinkages and interdependencies existing between population, sustainable development, the empowerment of women and the eradication of poverty. We have been working in partnership towards these goals. The European Union is convinced that the success of Cairo can be repeated and that a successful, forward-looking outcome of the twenty-first special session of the General Assembly is possible through a spirit of common purpose and shared vision.

The President (*spoke in Spanish*): I now call on Her Excellency Ms. Vilija Blinkevičiūtė, Vice-Minister of Social Security and Labour of Lithuania.

Ms. Vilija Blinkevičiūtė (Lithuania): Lithuania aligned itself with the statement made by Ms. Brigitte Zypries of Germany on behalf of the European Union. I would now like to introduce the Lithuanian perspective on the relevant issues.

The International Conference on Population and Development (ICPD) Programme is of key importance to Governments, as well as to non-governmental organizations and individuals dealing with social development issues. In Lithuania, the goals and undertakings of this Programme are integrated into our Government's national strategy and are reflected in social policy objectives. Integration of the population and social development dimensions, such as securing equal opportunities for men and women, the availability of reproductive health care services and the strengthening of partnership with non-governmental organizations are urgent issues today which are important to every country.

Lithuania will follow the United Nations recommendations to organize its year 2000 population census. The census will be carried out in 2001 and will make it possible to collect precise data on the demographic and socio-economic characteristics of the population.

In Lithuania, as in many other European countries, the ever-decreasing birth rate has a major influence on the ageing of the population and has become a very urgent issue. After the United Nations declared the year 1999 as the Year of Older Persons, Lithuania adopted the Programme of Action to deal with the main problems of senior citizens.

Considering the demographic tendencies of our country, the Government of Lithuania seeks to integrate demographic factors into social development strategies and all planning stages of resource distribution, in order to meet all the demands of citizens and to improve the quality of life of the present generation and of future generations.

Over recent years, Lithuania has been faced with a new challenge — increased migration. Therefore, one of our priority tasks is, on the one hand, to combat illegal migration and, on the other, to provide a legal and social basis for refugees and asylum seekers. A party to major international instruments on migration, Lithuania has recently adopted a special programme on migration control prepared in accordance with the relevant European Union regulations.

Every effort is being made of late to develop the social budget model of the International Labour Organization, on which social expenditures are based. Retirement benefits, relief, employment, health and other expenditures should be included. This allows us to define a social security level that the country may achieve, as well as to forecast indicators, taking into consideration demographic and economic development to support the existing system. The results of this model may be used to make social policy decisions.

The elaboration of the concept of the Lithuanian family policy was started shortly after the Cairo Conference. The programme on family policy was adopted in 1996. The content of the programme was greatly influenced by the recommendations of the European Population Conference, held in Geneva, and by the Cairo Programme of Action.

Taking into account the principle of equal opportunities for both sexes, underlined in the Cairo Conference as a human right, the Parliament of the Republic of Lithuania adopted the Law on Equal Opportunities for Women and Men in 1998. This law requires the establishment of an ombudsman to monitor equal opportunities for women and men.

Lithuania supports the goals formulated in the ICPD Programme, especially those aimed at decreasing the mortality rate among mothers, infants and children and at providing reproductive health care services and sexual education programmes. Lithuania is successfully implementing the Mother and Child Programme, focused on maternity and child health care. We agree with the provision of the Cairo Conference that abortion is not a method of family planning. Therefore, women attending women's consultation clinics are consulted on the issue and introduced to contraceptive means and methods.

In Lithuania, non-governmental organizations have an ever-increasing role in defending women's rights, dealing with family planning, children and youth issues and providing social services to senior citizens. The Law on Social Services, adopted in 1996, guarantees financial support from the State and municipalities for those non-governmental organizations. This approach is reflected in the Infrastructure Development Programme, which was initiated by the Ministry of Social Security and Labour of Lithuania and financed by the Government.

With Cairo Conference commitments in our minds, we should continue to search for ways to promote effective cooperation with municipalities, non-governmental organizations and other organizations. I believe that the coordination of actions, distribution of information and public support will ensure successful implementation of the Cairo Conference Programme of Action.

The President (*spoke in Spanish*): I now give the floor to His Excellency Mr. Martin Bartenstein, Federal Minister for the Environment, Youth and Family Affairs of Austria.

Mr. Bartenstein (Austria): Allow me, first of all, to align myself fully with the statement made this morning by Germany on behalf of the European Union.

One of the goals of the Cairo International Conference on Population and Development five years ago was to slow down the dynamics of population growth. This year will certainly see the global population mark cross the 6 billion threshold, but the median versions of United Nations projections suggest that this growth should come to a stop at the 10 billion mark by the end of the twenty-first century. While developing countries will experience a distinct abatement in their population growth, the population of industrialized countries will stagnate. In Europe, the population is expected to decline by 10 to 14 per cent by the year 2050.

Austria's population development more or less reflects that of other States members of the European Union. Its most outstanding feature is a steady growth in the number of older people. As a result, the age structure of our country is changing, and the ratio of over-60-year-olds to under-15-year-olds will shift from 1:1 today to 3:1 by 2030.

Austria has taken a number of measures in recent years to improve the social and economic conditions of families, further increasing the already high level of family benefits. Financial transfers such as the family allowance, and non-cash benefits such as free textbooks and free transport for school children amount to de facto benefits of 3,400 euros per family per year.

A concrete goal of great importance is the fight against maternal, infant and child mortality. Globally, infant and child mortality rates have been reduced by a third; in Austria a reduction of two thirds, to 4.8 per thousand, has actually been achieved. Austria therefore ranks among the top 10 countries worldwide with respect to the lowest child mortality rates. Similarly, Austria has an extremely low maternal mortality rate, of only four to six incidents among all deliveries per year.

A major instrument in the achievement of this success is the so-called mother-child passport, a preventive health care programme, free of charge, covering pregnancy from an early stage and continuing until the child turns four. The purpose of the "passport" is to diagnose high-risk pregnancies, to protect the mother and her unborn child and to identify childhood diseases or disabilities as early as possible.

Even though notable achievements could be made in combating infant mortality worldwide, pregnancy and childbirth still constitute an alarmingly high risk to the life of women in developing countries. Key activities in implementing the Cairo Programme of Action therefore have to include initiatives against maternal mortality. Sexual and reproductive health education, particularly for girls, should start at school age, and should be universally available. Reproductive medical care and services should be tightly focused on the importance of hygiene and assisted delivery by trained midwives.

In Austria, preventive approaches to sexual and reproductive health have been found to have very positive effects with regard to avoiding unwanted pregnancies and to protection against HIV and AIDS. Counseling services for adolescents are of critical importance in this regard. These services must focus on the use of condoms and other contraceptives, and even more so on responsible sexual behaviour and respect for the partner's rights and health, a message that needs to be spread particularly among young men.

It has been possible to curtail the spread of the HIV-AIDS virus in Austria. In recent years Austria has recorded a significant reduction in HIV rates. The incidence of new HIV-AIDS infections has declined rapidly, by almost two thirds since 1993, to a world-wide low of 1.1 cases per 100,000 inhabitants. But we have to look at the global picture: each year, 6 million people are newly infected by HIV-AIDS. We are painfully aware of the impact of HIV-AIDS on the social and economic development of many developing countries, particularly in sub-Saharan Africa; it is capable of reversing the development gains of recent decades. From our experience, we are convinced that any future prevention strategy against HIV-AIDS must give priority to education, particularly of adolescents, about the threat of HIV-AIDS, and must motivate them to use condoms.

Austria is concerned about the increase in the practice of trafficking in migrants, in particular women and children subjected to violence, forced labour or sexual exploitation. We have recently been experiencing a surge in these crimes following the refugee crisis in the Balkans. The international community should develop clear penalties for trafficking, backed by effective procedures and laws to prevent such crimes. In this context, I want to highlight the ongoing work of the United Nations Commission on Crime Prevention and Criminal Justice.

Every year, 70 to 80 million women get pregnant against their will, 600,000 women die of the consequences of pregnancy and childbirth, and 80,000 women die as a result of unsafe abortions, facts which demonstrate the need for action at the global level. Such challenges surpass the solving capacities of States; they require joint efforts by the international community, developing and industrialized countries alike. Austria thus recognizes the need to increase the funds available for population and development programmes. In this regard, we will review the current level and use of funds for implementing the objectives of the Cairo Programme of Action with a view to increasing the emphasis on bilateral projects to promote sexual and reproductive health.

Projects, in cooperation with African and Pacific countries, are envisaged to concentrate on supporting women throughout pregnancy and childbirth, and on sex education for adolescents both in schools and in extracurricular programmes. Austria therefore supports the goal, as a key future action, of increasing the funding for reproductive health care programmes for adolescents.

In conclusion, let me point to the link among population, development and sustainability. The fight against poverty is important to check population dynamics, but also to sustain the ecological balance of our planet. The Rio and Cairo Conferences launched us on the road to meeting these crucial challenges. Five years on, we are able to highlight many important processes which have been initiated. The empowerment of women has proven to be an important and successful step in the right direction and is leading us to an emerging human right: the right of all individuals to determine how many children they want to have and when they want to have them. Also in this context, it is important to bring the ongoing discussion on key future actions to a successful conclusion. Austria is prepared to make its contribution to ensure that this concept will come to full fruition.

The President (*spoke in Spanish*): I now give the floor to the Chairman of the delegation of Iraq, His Excellency Mr. Saeed Hasan.

Mr. Hasan (Iraq) (*spoke in Arabic*): Permit me first, Sir, to say how pleased my delegation is to see you presiding over the work of the General Assembly at its twenty-first special session, on overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD). We have every hope that your experience and wisdom will help make the work of this session a success.

The Programme of Action of the 1994 International Conference on Population and Development marked the beginning of a new era in United Nations efforts to achieve sustainable development for all and to reaffirm the importance of human rights, including the right to development. Other major United Nations conferences held in the 1990s also bolstered the principles and objectives of the ICPD Programme of Action. Now more than ever we need careful follow-up, with a view to translating the recommendations of these conferences into concrete measures that can fulfil at least a minimum of the hope that the international community pinned on their results.

Regrettably, we are witnessing a reluctance by some developed countries and international institutions to do their share in implementing the ICPD Programme of Action. This harms the efforts of the developing countries, obstructing their attempts to establish a foundation that would allow for sustainable economic growth, the elimination of poverty and an increase in investment in the social sector, particularly in health, education and family planning. It takes two to tango, and efforts must be made by all — particularly the rich countries — if we are to achieve the desired objectives.

Iraq was one of the pioneers in adopting organized scientific planning to mobilize and develop human and financial resources so as to achieve sustainable economic growth aimed at bringing about the prosperity of human beings and at maintaining their right to their natural resources and their environmental rights.

I should like to provide several examples of our achievement. We have implemented a policy of free education at all levels, beginning with kindergarten and extending to doctoral studies, which includes the principles of compulsory primary education and combating illiteracy. That policy has been successful, and Iraq was given an award by the United Nations Educational, Scientific and Cultural Organization (UNESCO) for its achievements in that respect.

We have implemented a policy of universal free health services, particularly for children and pregnant women. This has led to a significant decline in infant mortality and an increase in average life expectancy in Iraq and the elimination of most endemic and many contagious diseases. We are providing social care for the elderly, orphans, the disabled and poor families, as well as special care for the people of rural areas, including economic and social necessities aimed at limiting urban migration. Special care is being provided for women, opening paths to enable them to participate in all areas of life, including the political and scientific, and reaffirming their role in building society.

Women are occupying more important positions in everyday life, and the numbers of women participating in all economic, cultural, political, social and intellectual activities has increased significantly. Iraq has adopted many laws and administrative regulations that aim at providing equal and fair treatment for women with regard to both their rights and duties. The adoption in 1986 of a declaration of the right to development in all its forms signalled a new stage in the recognition of development as a basic human right. This right, however, has been obstructed by international and domestic obstacles. At the international level, those obstacles took the form of continuing policies that showed a lack of respect for the rights of peoples to self-determination and to sovereignty over their natural resources, in addition to other forms of interference in the internal affairs of States. They also took the form of policies obstructing the transfer of technology to third world countries, environmental problems and debt. At the national level, such obstacles took the form of illiteracy, disease and poverty, all caused by the lack of development.

In this context, I should like to shed light on a serious obstacle that has begun to become a phenomenon in the 1990s, at the beginning of the third millennium: the economic sanctions that are imposed on developing countries. The comprehensive economic sanctions imposed on Iraq are, perhaps, the most obvious example of that. The sanctions have interrupted — indeed, destroyed — most of Iraq's plans for population and development.

I should like to provide some examples. The impact, direct or indirect, of those sanctions has had a cumulative effect that has led to the structural disruption of the cultural, social and economic fabric of the Iraqi people. Children were the first to suffer from those sanctions. Some 33 per cent of the children in Iraq are suffering from severe malnutrition, and according to statistics from the United Nations Children's Fund, 6,000 to 7,000 Iraqi children die monthly because of the lack of medicine and food. All the educational and vocational institutions have been paralysed, in full or in part, and more than 1 million students have dropped out of school, in addition to the fact that failure rates have risen dramatically. The health and environmental situation has deteriorated significantly, and this has had a severe impact on public health, particularly women of reproductive age, pregnant women, children and the elderly. To date, more than 1 million people have died because of the sanctions.

The role of women has also receded and the contribution of women to economic and social life has declined. The declining employment opportunities and the declining financial rewards have prompted many women to leave work. The escalating cost of living and the suffering has also resulted in a brain drain. The imposition of a comprehensive blockade against Iraq constitutes genocide and is a blatant violation of all human rights. Every day that passes without a solution being found adds to the moral, legal and human burden placed on the United Nations and the Member States. We hope that this special session will provide an opportunity to call for the lifting of sanctions, which not only impede development but collectively kill the human being, who is the object of such development.

The President (*spoke in Spanish*): I now call on the Chairman of the delegation of South Africa, Mr. Dumisani Kumalo.

Mr. Kumalo (South Africa): When the Cairo Programme of Action was adopted, our South African democracy was still in its infancy. Our leaders were new in office, but rich with ideas of what kind of society we wanted to build for ourselves. Over the past five years, we began to put life into the Cairo document. Our national plan for social development already incorporates the ideas that began in Cairo. The endorsement of the policies of our Government were clearly demonstrated at our recent second democratic elections, when more South African citizens affirmed their support for the Government than was the case during the historic 1994 election.

As we open this special session today, my Government is optimistic that the session will adopt a forward-looking and action-oriented document which will provide guidance on how to proceed in the further implementation of the Cairo Programme of Action. South Africa views the proposed key actions as pivotal to the national, regional and global population and development agendas.

Recognizing the inequalities that women have suffered, South Africa's Constitution embodies gender equality and the progressive implementation of basic social rights, such as access to education and health care, including reproductive health. It protects the individual's right to control his or her own body and it also includes freedom from discrimination on the basis of sexual orientation.

South Africa strongly supports the objectives of the Programme of Action of the International Conference on Population and Development (ICPD). However, we believe that it does not suffice to focus only on reproductive health and rights. In addition, we need to create enabling socio-economic conditions in which individuals may exercise their rights. Our social development programmes and macroeconomic growth policies aim to change the determinants of the country's population dynamics in such a way that these trends are consistent with the achievement of human-centred sustainable development and poverty alleviation.

My country remains a land of stark contrasts, of racially defined haves and have-nots, and of continuing gender inequality. Over the past five years, our agenda has been to remove structural barriers to full participation by the previously marginalized, to create equitable access to resources and services, especially for women and children, and to empower and enable them to achieve their full potential. In addition to numerous sectoral policies and legislation aimed at transforming the delivery system, South Africa is allocating nearly two thirds of its national budget to the social sector. The Government is providing free access for pregnant and lactating mothers and children under the age of six to all levels of health care. Particular actions by my Government, which are aimed at empowering women, include the improvement of women's access to credit, the removal of discriminatory customary legislation, and facilitating women's involvement in small and medium-sized enterprises.

The latest census reflects a total population of about 40.5 million South Africans, of whom 44 per cent are below the age of 20 years. The proportion of teenage mothers remains unacceptably high at around 15 per cent. This clearly demonstrates the urgent need to address youth and adolescent reproductive and sexual health and sexual rights. South Africa is implementing its constitutional commitment to the individual's right to control his or her body. To this end, a life-skills and sexual education curriculum has been developed to be incorporated into the national school curriculum.

My country recognizes that unsafe abortion is a major public health hazard. As many as 44,000 women per year visited hospitals for treatment for the complications of unsafe abortions. In response to this, and in compliance with the constitutional right to reproductive health, my Government passed the Choice on Termination of Pregnancy Act, which removes barriers to women's right to choose. To date, over 50,000 women have accessed safe termination of pregnancy services, which incorporate before-and-after counselling and post-termination contraception. Furthermore, maternal mortality has been declared a notifiable event in order to monitor and address preventable causes of death during pregnancy.

The southern African subregion has become the epicentre of the HIV/AIDS epidemic. Certainly, the infection rate of 1,600 people a day in South Africa is among the highest in the world, with young people in general — women in particular — and the poor being most vulnerable. This is essentially a gender equality and rights issue. It brings the question of human rights into the terrain of sexuality, since one of the major causes is the lack of empowerment of women to negotiate safer sex and the frequency of violence within sexual relationships.

South Africa's demographic profile is expected to be severely affected by the HIV/AIDS onslaught, which will also have devastating socio-economic consequences. Having been recognized as more than just a health issue, the HIV/AIDS campaign is a national political priority, led by President Mbeki, and is aimed at changing behaviour and attitudes, beyond mere heightened awareness. A major stumbling block in addressing the impact of the HIV/AIDS epidemic is the high cost of anti-AIDS drugs. This requires a commitment to addressing pricing structures by major multinational pharmaceutical companies, as well as the mobilization and provision of new and additional resources to assist developing countries to access medical interventions against HIV/AIDS.

South Africa and the rest of the developing world will face a number of challenges related to the population and development agenda in the twenty-first century. These challenges include the shortage of reliable population and development data and information, insufficient monitoring and evaluation systems for the implementation of the population policy, and inadequate technical skills for modelling and integrating population concerns into development planning and project design. In order to effectively address these challenges at the national level, we recognize the need for strong partnerships, which should include civil society, the private sector and the international donor community.

The Cairo Programme of Action already articulates a comprehensive approach to issues related to population and development. It identifies a range of demographic and social goals to be achieved over a 20-year period. South Africa believes that, by building on the success of Cairo and upon the progress already achieved, this special session should give further impetus to the promotion of gender equality and the empowerment of women and to securing the rights of adolescents to make informed choices about their sexuality and reproductive health. The successful implementation of the Programme of Action at all levels can only be to the benefit of all countries.

The President (*spoke in Spanish*): I now give the floor to His Excellency Mr. Francesco Paolo Fulci, Chairman of the delegation of Italy.

Mr. Fulci (Italy): I am taking the floor on behalf of the Italian Minister of Social Solidarity, Ms. Livia Turco, who was prevented from participating in this special session by urgent parliamentary engagements.

Allow me to begin by congratulating you, Sir, on your election as President of the General Assembly at the special session, and all the newly elected members of the Bureau.

Italy fully endorses the statement made by the head of the German delegation on behalf of the European Union and wishes only to add a few short comments from a national point of view.

First, since 1994 momentum has been building in the field of population and development, thanks to the

Cairo Conference and to the United Nations Population Fund (UNFPA) and the personal efforts of its Executive Director, Dr. Nafis Sadik. Population is no longer seen as a purely demographic problem, but as an issue with economic and social dimensions. In Cairo, women became a central actor in the development process and in the control of population growth. Thanks also to the intensified activity of non-governmental organizations, there is an increased and widespread awareness of the problems of gender equality and the empowerment of women, which has contributed to a sharp downturn in demographic growth. Let me recall that the forthcoming high-level segment of the Economic and Social Council, at Geneva, will discuss the advancement and the empowerment of women in the framework of the role of work and employment in poverty eradication.

Second, population trends in Italy make the country unique. According to the latest United Nations Population Division estimates, Italy has the oldest population in the world. I hope there is a lot of wisdom too. In 1998 it had both the world's highest percentage of people aged 60 and older and the lowest of youths under the age of 15. Italian women and couples have one of the lowest fertility rates. Since 1975, a wide network of local counselling services has been available to provide advice and assistance on reproductive rights and health. In Italy there is a particularly low rate of teenage maternity and of children born out of wedlock. There is also a relatively low rate of divorce. At the same time, thanks to an effective national health-care system and specific legislation, the life expectancy in Italy is among the highest in the world; infant mortality is among the lowest; and maternal mortality is close to zero.

In the 1993-1999 period, the number of immigrants in Italy has nearly doubled, from 573,000 to 1,127,000, making up 2 per cent of the Italian population. In 1997 and 1998 Italy granted a total of 277,000 immigration visas. The problem of temporary asylum stretching into permanent residency has been exacerbated by recent events in the Balkans. In the past few years, new legislation has been enacted, most recently last year, to better manage immigration flows, assure immigrants' rights and responsibilities, foster integration and coexistence and promote a common European immigration policy. Italy actively supports the approval of the United Nations protocol on trafficking in immigrants.

While Italian women still lag somewhat behind some of their European counterparts in terms of presence in the political arena and of unequal gender distribution of work, particularly in care-giving, the situation is improving rapidly, especially for younger women, in the areas of education and employment.

Third, in response to these unique trends, the Italian Government has adopted a number of measures, at both the legislative and administrative level.

Fourth, at the international level, in 1999 Italy has significantly stepped up its contributions to UNFPA, the United Nations Development Fund for Women, the World Health Organization and the Joint United Nations Programme on HIV/AIDS. This is supplemented by significant bilateral aid programs and contributions to the activities of Italian non-governmental organizations in this field. These include integrated programmes in various sectors, paying special attention to gender and women's empowerment policies; test projects, which have been particularly successful in setting up integrated counselling services for women and families; and direct action for the protection of children, women and disabled persons, particularly in Albania, and this well before the current crisis.

Fifth, Italy feels that the issue of the aging of the population will gain even greater significance in the years to come. The equally important issue of international migration and development should be addressed in international forums and at the United Nations to analyse the impact of immigration on both developed and developing countries. We also applaud UNFPA attention to the problems of youth.

Moreover, the Italian Government shares the concern over the tragic spread of HIV/AIDS, especially in many African countries. The United Nations system must, absolutely must, find a coordinated response to this epidemic, while donor countries need to provide adequate support for national programmes to fight this deadly scourge.

Much remains to be done. Throughout the world, maternal mortality needs to be lowered, reproductive health and rights guaranteed, the status of women strengthened and adequate assistance for refugees assured. Italy is deeply concerned by all of these questions. But we are confident that the United Nations system will continue its invaluable action through the rich analyses of world populations conducted by the Population Division and the UNFPA's precious action in promoting healthier trends in population and development.

The President (*spoke in Spanish*): I give the floor to the chairman of the delegation of Spain, Mr. Inocencio Arias.

Mr Arias (Spain) (*spoke in Spanish*): It is an honour for me to take the floor in this special session of the General Assembly.

Cairo +5 is part of a series of international conferences that constitute fundamental elements for the advancement and improvement of the situation of mankind, and particularly that of women, who in many instances suffer major discrimination based on their gender and on historic, social and cultural beliefs that undermine their possibilities to advance and their basic right to occupy their due place in all aspects of social life on an equal footing with men.

The importance of Cairo +5 has been underscored by the intensive preparatory process for this special session, which notably involved very active participation by civil society through non-governmental organizations and, specifically, many which represented adolescents, one of the main social groups that are beneficiaries of the Cairo Programme of Action.

Spain begins this process with two firm convictions. First, the Programme of Action has as its main objective strengthening the role of women and adolescents on the basis of recognition of their rights and freedoms in the field of health and reproductive rights, according priority to the proper exercise of those rights and to providing appropriate training and information, as well as making medical and health resources available to these communities so as to enable them to exercise their rights responsibly and safely.

Secondly, we need to view the Programme of Action from a comprehensive and future-oriented viewpoint. It must be comprehensive because, obviously, population is a fundamental phenomenon affected by all kinds of influences: level of development, level of resources, environment, the status of women, social, cultural and religious factors and the like. It is therefore of fundamental importance to focus on any population-related matters from an all-embracing perspective that takes into account the greatest possible number of factors — and the interactions between them — that affect population.

Our viewpoint must be future-oriented because the Programme of Action will obviously have to be informed by the experienced acquired as we implement it and by the changes that have occurred in international society in the past few years, whose effects, of course, will carry over into the next millennium.

In this connection, my delegation would like to highlight just some of the priorities for the next five years. First, we have to make definite progress in achieving gender equality in all areas. Secondly, we must ensure that adolescents have real access to suitable social and medical services in relation to their sexuality, while guaranteeing both confidentiality and respect for those adolescents' religious and cultural beliefs. Thirdly, we must increase our efforts to bring down maternal mortality rates, especially by preventing unwanted pregnancies. Also, we must ensure that abortion, where permitted by law, is carried out with the necessary medical, hygienic and psychological safeguards. Fourthly, we must step up measures to prevent the spread of AIDS, and we have to strive resolutely to find a cure for those suffering from that terrible disease. Fifthly, we have to react very strongly to the brutal sexual attacks that we have recently witnessed against refugee and displaced women, in Africa as well as in Europe, by giving clear priority to reproductive health measures and services in refugee camps.

Spain is aware that if the Programme of Action is to succeed and achieve the goals set out in the report of the Secretary-General, we must have sufficient financial resources. We therefore share the concern of others and we understand the alarm raised by the Director of the United Nations Population Fund (UNFPA), Mrs. Sadik, on the decline in the Fund's basic resources and the negative impact that decline would have, unless it is rectified, on the various national programmes supported by the Fund.

Despite the budgetary difficulties caused by the drop in official development assistance in the past few years, Spain has held its contribution to the Population Fund steady since 1995 and, bearing in mind the stimulus this special session has given the Cairo Programme of Action and the importance of the objectives we have set ourselves, Spain is studying the possibility of increasing its contribution to the Population Fund over the next few years.

Concerning voluntary terminations of pregnancy, which, as the final document of the Cairo Conference says so well, cannot be considered or used as a method of family planning, Spain's legislation governs those cases in which terminations are allowed and the grounds upon which terminations may be permitted in our country. The Ministry of Health operates epidemiological and public health monitoring programmes covering women who undergo terminations and the conditions in which terminations take place so that they are performed in suitable conditions and with sufficient safeguards.

I should like now to refer to the activities of the Spanish International Cooperation Agency. As time is short, I shall just summarize the activities that the Agency carried out during 1998. Under the bilateral cooperation rubric, projects in various countries, begun in previous years and aimed at integrating women, improving maternal and child health and achieving integrated rural development, were continued. The Agency also carried out various programmes with the Population Fund in the Philippines and Algeria and is studying others, especially in Central America and Ibero-America, for the near future. At the same time, the Agency has contributed several million dollars to the Pan American Health Organization (PAHO), whose programmes target the female population as a priority, and held two meetings on co-financing, with non-governmental organizations, projects basically designed to advance the status of women in various countries around the world.

My delegation is aware that there is still much to be done at both the national and the international levels and that it is everyone's responsibility to make progress together until we achieve the objectives set in Cairo. I would echo the words of the representative of the Presidency of the European Union by stressing the idea that however population changes in the future, there is a need for decisive action on the part of all those with responsibilities in this area so that we can successfully surmount the challenges facing the international community in this field. In this connection, I would like to convey to you, Mr. President, Spain's commitment to being an active and responsible partner in the common effort to achieve these objectives.

The President (*spoke in Spanish*): I now call on His Excellency Mr. Claude Bouah-Kamon, Chairman of the delegation of Côte d'Ivoire.

Mr. Bouah-Kamon (Côte d'Ivoire) (*spoke in French*) First of all, I must convey Mr. Thiam's regrets: our Minister of Planning and Development has been unable to shed his other commitments in order to be here this morning in New York. He has asked me to convey to you, Mr. President, his congratulations on your election as President of the General Assembly at this special session, which will undoubtedly be a success.

Mr. Semakula Kiwanuka (Uganda), Vice-President, took the Chair.

This mid-term review of the Cairo Conference gives me an opportunity to give a brief presentation before this Assembly of the population and development situation in Côte d'Ivoire and to sketch the outlines of Government policy in this area.

From 6.709 million in 1975, the Ivorian population reached 10.815 in 1988 and is now estimated at 15.5 million. With a mean annual rate of increase of 3.8 per cent between censuses, Côte d'Ivoire has one of the highest rates of growth in the world. The increase is associated with a high birth rate of 43 per thousand, a significant downturn in the death rate, from 28 per thousand in 1985 to 13 per thousand in 1994, and the considerable effect of immigration: in 1998, foreigners numbered 28 per cent of the total population.

If this rate of increase continues, Côte d'Ivoire will have a population of 22.3 million in 2008 and 27.5 million in 2015. The population will continue to be a young one because, up to 2015, children under 15 will make up over 48 per cent of the total population.

Côte d'Ivoire is a multiethnic and multicultural society whose socio-demographic dynamics are linked to the way the country has been economically, politically and administratively organized over the last three decades; a transethnic nation was promoted for harmony in human relations and national integration. In this society, the institution of the family is undergoing profound change: the traditional, extended family is becoming more nuclear, particular in urban settings, and the role of women remains preponderant.

In the economic sphere, the collapse in world agricultural prices in the context of a structurally weak economy gave rise to an economic crisis in the 1980s whose effects on the population's quality of life have been pronounced.

Despite the economic growth that began under the influence of the structural adjustment programmes combined with the devaluation of the CFA franc in 1994, the problems of survival experienced by poor and vulnerable households were aggravated and the harmful effects of the crisis have been very much felt in some social sectors — education, employment and health — and have to an extent compromised the major gains made in previous decades. In the past few years, Côte d'Ivoire has got back on the growth track, with an annual growth rate of 7 per cent.

Our Government's strategy is based on withdrawing the State from production activities, developing the private sector and fighting poverty. From the political standpoint, with our State of law, the democratization of the media, decentralization and administrative regionalization and support for civil society, an important stage has been initiated in providing conditions for broader popular participation in the life of the country.

In response to the commitments undertaken in Cairo, in March 1997 Côte d'Ivoire adopted a national population policy that enjoys the technical and financial support of a number of institutions, including the United Nations Population Fund (UNFPA). The national population policy has been designed as one of the main components of a societal project that our country aspires to carry out for its current and future generations. It seeks to improve living conditions, to balance demographic growth and socio-economic development and to preserve the environment.

The main objectives are the following: first, to reduce by the year 2000 general maternal and infantile morbidity and mortality rates and the incidence of sexually transmitted diseases, such as HIV/AIDS, by strengthening health care, in particular reproductive health care; secondly, to lower the overall fertility rate from 5.7 per cent to 4.5 per cent by the year 2005; thirdly, to control internal and international migratory movements by developing sustainable, profitable activities in people's places of origin in order to limit rural exodus and regional disparities; fourthly, to meet the requirement to provide equality in education, health, employment and food resources by making school enrolment obligatory up to the age of 15, particularly for girls; fifthly, to improve the economic, social and legal status of women and young people by rehabilitating the family, which is the intended beneficiary of all development efforts; sixthly, to promote qualitative development by maintaining living and environmental conditions by developing and implementing stricter guidelines for urban development and housing.

The seventh objective is to develop national capacities for planning and management in the area of data collection and of implementation and institutional coordination of population policies and programmes. Specifically, several sectoral plans have been developed and implemented by the Government through the relevant technical ministries: the national health development plan, within the Ministry of Health, the national environmental plan of action, within the Ministry of the Environment and the Forest, the plan of action for women, within the Ministry for the Family and the Promotion of Women, and the national plan of action to develop education and training, within the Ministry for National Education and Basic Training. The Ministry for Planning and Development Programming is responsible for coordinating national policy in poverty eradication.

The implementation of this policy is multisectoral. It requires the commitment of the governmental institutions, the non-governmental organizations and civil society. A dynamic partnership has been developed among the various actors concerned, in particular the non-governmental organizations, which play an important role in implementing all programmes from the design stage to execution.

All these actions were conducted within a well-defined institutional framework consisting of a National Population Council, which seeks to assist the Government in defining its population policy and in monitoring the implementation of certain activities within the framework of this policy. It also consists of a National Population Bureau, whose main responsibility is to formulate population policies and strategies, to develop a programme of action for population, to develop an investment programme for it, to coordinate advocacy, information, education and communication, to follow up and evaluate the programme's activities and, generally, to encourage implementation of the national population policy and to coordinate population activities.

As the Assembly can see, Côte d'Ivoire is resolutely committed, with the modest resources available to us at this difficult time, to take specific steps to translate the Cairo recommendations into reality. The Government of Côte d'Ivoire pins great hopes on these actions because it believes that ensuring the well-being and improving the living conditions of people is the ultimate goal of any development policy.

The Acting President: I now call on Mr. André Adam, Chairman of the delegation of Belgium.

Mr. Adam (Belgium) (*spoke in French*): I wish to address the Assembly on behalf of Mr. Reginald Moreels, the Minister of Development Cooperation, who, unfortunately, is not able to be present today.

First, I would like to congratulate His Excellency Mr. Didier Opertti on his election to the presidency of the General Assembly at this twenty-first special session.

I associate myself with the statement made by Ms. Brigitte Zypries, Vice-Minister of the Federal Ministry of the Interior of Germany, who spoke on behalf of the European Union. My country shares and fully supports the concerns and objectives that she stated. Belgium thanks Ambassador Anwarul Karim Chowdhury, Chairman of the preparatory committee, Mrs. Nafis Sadik, Executive Director of the United Nations Population Fund (UNFPA) and Mr. Chamie, head of the Population Division. Through their hard work, they did an excellent job for the Commission on Population and Development in preparing and guaranteeing the success of the five-year review of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD), held in Cairo in 1994.

Since Cairo, many activities have been conducted upon the initiative of Member States in the more disadvantaged areas. Belgium has also sought to incorporate the resolutions of the ICPD in its domestic policies and in its new international cooperation policy. It is seeking to establish linkage between the actions defined in the major United Nations conferences that have been held in this decade with the major challenges of our societies: sustainable development, poverty and the status of women. We are mindful of observing human rights, which in the area of population should guide public choices.

Globally, in terms of population, definite progress has been made, but enormous challenges still lie ahead. Population growth seems to have slowed down even in countries where until recently fertility rates were high. However, it is still high, and the current population of 6 billion inhabitants could almost double before stabilizing around the year 2100. Urban populations will be larger than rural populations, which will cause inevitable and perhaps unforeseeable ecological repercussions.

Maternal mortality rates remain too high in many countries. Medical care before, during and after childbirth should be accompanied by family planning policies allowing couples to take free and responsible decisions and steps regarding their families, avoiding the need for illegal abortions. Belgium firmly supports gender equality, particularly in the area of sexuality and reproduction. Mindful of the well-being of women and children, we stress the importance of education, particularly for young girls and women.

A better-educated society will also be more open to intergenerational solidarity and to recognizing its multi-ethnic composition. This is essential in a world in which two major demographic trends are emerging: the ageing of our populations and an increase in international migration. Owing to decreasing birth rates and to the simultaneously increasing expectancy that people will live to old age, the percentage of elderly people in our populations is considerably increasing; at present this is true in Western countries, but it will soon be true in all countries. The necessary steps must be taken to guarantee that the elderly will have the resources they need and to provide the necessary assistance, especially in low-income countries. We must also develop a generalized social security system that will give the elderly access to medical and non-medical care.

Increasing migration, which in one way or another affects every region, requires an international approach to understanding the causes of this phenomenon and its social and economic effects, and to formulate solutions. Prevention is better than cure: to avoid conflicts, development projects must be conceived and employed in a preventive manner. We must also focus our attention on these two trends — ageing and migration — if we are to ensure a satisfactory quality of life for all inhabitants of the world, now and in the future, irrespective of their age.

I reiterate that Belgium remains a committed partner in implementing the Cairo Programme of Action. Since the Programme was launched, Belgium's voluntary contributions to the activities of the United Nations Population Fund (UNFPA) have constantly increased. To this we must add the portion of our multilateral and bilateral budgets and of our subsidies to non-governmental organizations that is devoted to population and development, in particular reproductive health activities, including family planning and the fight against HIV-AIDS.

Another kind of useful activity, even though it is carried out at limited financial cost, is the holding of technical seminars such as those that my country has organized: in November 1997, in cooperation with the Population Division of the Secretariat, on health and mortality; and in October 1998, in cooperation with UNFPA, on the ageing of the population. Undertaken on the initiative of national experts, these seminars enjoyed financial assistance from Belgian governmental bodies at the federal, regional and community level. We wish to continue these activities, especially to consider further the question of ageing.

I hope that this special session will provide an opportunity to give fresh impetus to development, international cooperation and the well-being of peoples, by encouraging ever-greater tolerance, freedom and justice.

The meeting rose at 1.35 p.m.

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General Assembly
Twenty-first Special Session

Official Records

2nd plenary meeting
Wednesday, 30 June 1999, 3 p.m.
New York

President: Mr. Opertti . . . . (Uruguay)

In the absence of the President, Mr. Ssendaula (Vice-President), took the Chair.

The meeting was called to order at 3.05 p.m.

Agenda item 8 *(continued)*

Overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development

The Acting President: The Assembly will now hear a statement by His Excellency Mr. Christon Tembo, Vice-President of the Republic of Zambia.

Mr. Tembo (Zambia): On behalf of the President and the people of the Republic of Zambia and, indeed, on my own behalf, I wish to commend the United Nations, particularly the United Nations Population Fund (UNFPA), for organizing this special session of the General Assembly.

Allow me to join other distinguished speakers in congratulating Mr. Opertti on his deserved election. I have no doubt that he will guide the Assembly to a fruitful conclusion of its work.

Let me allude to the protracted negotiations that have preceded this special session of the General Assembly. The results of the negotiations among our experts, which have culminated in this session, should be seen not as mere semantics but as broad-based ideas encompassing the diverse cultural, religious and regional differences represented in the large negotiation groupings.

It is now five years since such a high-level gathering met in Cairo to formulate a 20-year Programme of Action for population and sustainable development. Zambia actively participated in that important conference because we realize that population is both the agent and benefactor of sustainable development.

Since the Cairo summit, Zambia has made progress towards the implementation of the population and development programme. This includes, first, the development of a socio-economic policy framework to foster broad-based economic growth through the development of infrastructure and the enhancement of social delivery mechanisms; secondly, the development of a poverty-reduction framework and a national plan of action for implementation by the Government, the private sector, non-governmental organizations and civil society; thirdly, the development of health sector reform programmes aimed at increasing access to quality health services at the community level; fourthly, the introduction of an integrated reproductive health policy and a national youth policy; and, fifthly, the establishment of a comprehensive data-monitoring framework to provide socio-economic indicators for programme formulation and overall economic management.

Populations with high growth rates, declining economic output and a high debt burden continue to

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impede the development efforts of many developing countries, Zambia included. Zambia's population is currently growing at 3.1 per cent, while the economic output has remained stagnant. The stock of debt as a ratio of export earnings has continued to rise, resulting in Zambia's foreign debt burden becoming unsustainable. This has resulted in overall economic decline and inadequate resources for capital and human resource development.

High poverty levels, widespread illiteracy and inhibiting cultural and traditional value systems continue to be major obstacles to enhanced population development in Zambia. Currently, the country has a high incidence of poverty, estimated at 70 per cent, 89 per cent of which is in rural areas. In addition, 48.3 per cent of the population is under the age of 15. This obviously exerts enormous pressure on social services and on the ability of government to cater for the needs of the people.

Being a stable and peaceful country, Zambia has provided a natural sanctuary for displaced persons fleeing civil strife in their own countries. In addition, my country's involvement in resolving regional conflicts has put tremendous pressure on our meagre resources.

Despite these constraints, Zambia is fully committed to the implementation of a national population policy. To this end, Zambia has put in place various programmes aimed at uplifting the lives of its people. Such programmes and projects are aimed at increasing economic opportunities and generating employment and income. In addition, a number of social safety-net schemes have been put in place to address the needs of the core poor in both rural and urban areas.

Zambia supports a sustainable debt management strategy aimed at significant debt relief and cancellation. In this regard, I am making an earnest appeal to donor States, multilateral institutions and the private sector to support Zambia and other developing States in their efforts to eradicate poverty by direct investment and cancellation of debt, and by ensuring that structural adjustment programmes are humane and responsive to social and environmental concerns.

In order to successfully militate against these negative population dimensions and their manifestations, such as disease and poverty, we need to introduce universal basic education; promote the status of women and mainstream gender in all aspects of population and development; provide adequate information to couples and individuals on the need to have manageable family sizes; enhance an integrated reproductive health service system; reduce the high rate of infant and maternal mortality by improving health facilities and services; and establish a national institutional framework to address the HIV/AIDS epidemic.

In this regard, Zambia is revising the national population policy in order to accommodate the emerging issues of HIV/AIDS, environment, gender and the broader concept of reproductive health. Zambia has also established a monitoring institutional framework comprising an all-party parliamentary group on population and development, a gender division in the Office of the President and a gender focal point in each public institution. This is to ensure advocacy at the political and administrative levels alike.

At the international level, Zambia is to host the Eleventh International Conference on AIDS and STDs in Africa (Xi-icasa) in September this year, which I hope representatives of all countries and organizations represented here will attend. I therefore, in this regard, recognize and acknowledge the positive contribution that civil society has made in the formulation and implementation of population programmes and projects.

I would like to reaffirm my country's commitment to the implementation of the Programme of Action of the International Conference on Population and Development (ICPD). Indeed, we are looking forward to seeing the Cairo vision become a reality as we approach and enter the new millennium.

The Acting President: I thank the Vice-President of Zambia for his statement.

I now give the floor to His Excellency Mr. Arpád Gógl, Minister of Health of the Republic of Hungary.

Mr. Gógl (Hungary): May I take this opportunity to congratulate Mr. Opertti on his assumption of the presidency of the General Assembly at this special session. Let me assure him of the full support of my delegation in the discharge of his important duty.

My delegation fully subscribes to the statement made by the representative of Germany, who spoke on behalf of the European Union and its associated countries, including the Republic of Hungary.

Population and development are among the global issues of fundamental importance that humanity is facing at the threshold of the new millennium. As we approach the turn of the century, the international community is encouraged to take an honest and forward-looking inventory of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD). It is by no means an exaggeration to say that the well-being of humankind in the twenty-first century will, in many aspects, be contingent upon our ability to provide relevant answers to the interrelated challenges of such global issues as population and sustainable development.

The past five years have confirmed the correctness of the demographic trends and the Programme of Action put forward in the Cairo document. While we can be proud of the results achieved in addressing various aspects of these complex issues, further coordinated actions are needed. The unresolved problems of population growth, structure and distribution, and their impact on the everyday lives of people, including the inadequacy of education, health care and social security systems, require further efforts on the international, regional and national levels.

The Government of Hungary continues to be committed to the principles, goals and recommendations of the International Conference on Population and Development held in Cairo in 1994. I would like to take this opportunity to reaffirm our deeply felt political commitment to the ongoing implementation of the ICPD Programme of Action.

Hungary is among the countries where demographic processes have long been the focus of political and public attention. Over the past decade, low fertility and continuing high mortality rates have resulted — after a short and moderate population increase — in a steady decrease of the population, with serious economic and social consequences. My Government views the demographic situation of the country as a major national and social issue which calls for governmental responsibility and the joining of all forces of society. We are compelled to act now and not to leave unsolved problems to our grandchildren. Our immediate aim is to moderate and subsequently stop the process of population decrease and later to achieve a modest increase, resulting in a more favourable age structure of the population. Achieving increased fertility and improving mortality rates require continuous, wide-ranging and coordinated measures. They constitute an integral part of the Programme of my Government and we have the political will and determination to fully implement them.

Despite changing family formation patterns, family is and remains a basic unit of society and reproduction, among other things. My Government strongly supports and advocates measures to promote family cohesion and the ability of families to raise children. We encourage a moral renewal of society, in which family and children are considered to be of high ethical value, where bringing up children wins respect and where the related costs and difficulties are mitigated by a family-friendly economic and social environment. Important measures have already been taken by the Government that are aimed at improving the situation of families with children through a reformed tax and social security system.

To ensure a coherent and effective framework for the implementation of these measures, the Government has initiated the elaboration of a new family policy. By the same token, we make efforts to strengthen equal opportunities and to help people with disabilities and other vulnerable groups, including ethnic minorities. To assist families as well as socially disadvantaged groups is an important consideration in improving our social security system.

Further steps are needed to strengthen our health services, including the improvement of prenatal care, childbirth conditions and the care of newborn babies. Our health improvement programmes should include actions aimed at changing widespread irresponsible behaviour patterns during pregnancy, such as smoking and alcohol consumption. We have to develop a complex set of measures to decrease the alarmingly high rate of induced abortion, taking into account the relevant decision of our Constitutional Court. The wider use of modern contraceptive methods and the development of a family planning network have to be ensured as well. Through these measures, a further decrease in premature births should also be achieved.

The high levels of mortality and morbidity in all age groups, but especially among the male population, require special attention in our country. In order to develop a better and more efficiently operating health care system, to make it more prevention-oriented, to promote a healthy lifestyle and to make it more attractive for the population are only some of the areas where a lot remains to be done in strong interaction between the Government and civil society.

Human dignity is a right belonging to all generations. This fundamental right can be enjoyed only in a well-developed system of care and support for elderly people. These challenges require joint efforts by the family, the local community and the Government.

Hungary has always considered that tasks of this magnitude call for effective international and regional cooperation. Based on these premises, Hungary hosted the European Regional Population Meeting in Budapest last December to take stock of the regional experiences of the post-Cairo period. We are pleased to see the major conclusions of that meeting reflected in the document to be adopted at this special session. The United Nations, its programmes and specialized agencies should play an important role in monitoring and promoting the implementation of the Programme of Action, paying special attention to the differences in the situation of various regions. The Republic of Hungary is ready and willing to be part of these efforts.

The President: I now give the floor to Her Excellency Leonor Calderón, the Minister for Youth, Women, Childhood and the Family for Panama.

Ms. Calderón (Panama) (*spoke in Spanish*): On 7 September 1994, only six days after the Government of Ernesto Pérez Balladares came to power, the delegation that represented Panama in Cairo at the International Conference on Population and Development undertook to achieve implementation of the Programme of Action adopted by consensus on that occasion. Today, two months before the leadership of our country is handed over to a new Government, we are gratified to report that in these years we have adopted a series of measures relating to the recommendations of the Programme of Action.

The Government programme called "Public Policies for Comprehensive Development, Social Development with Economic Efficiency," aimed at tackling the country's main social problems, such as poverty, income distribution, structural unemployment, declining purchasing power, shortfalls in education and health and inefficiency of social expenditure. At present we have a public policy programme intended to harmonize efficiency and equity with an integrating approach. It is guided by a set of fundamental guidelines, such as legitimacy, legality, integrality, coordination, participation, regionalization, targeting and institutionalization.

In the political arena it should be noted that since the 1994 Conference, a Commission on Population, Environment and Development has been set up within the legislative assembly. This is supplemented by the creation of the Social Cabinet, which acts as an advisory body to the executive organ in the social area and whose basic purpose is to recommend actions which will lead to the design and execution of social policies that fall within the principles of development.

Panama is a country with a population of 2.8 million people, of whom 54 per cent live in urban areas, which reflects the high level of internal migration in recent decades. It should be noted that the Interoceanic Region generates the greatest proportion of the population, given that 56 per cent of the people live in these areas. And in this particular regard, it is important to highlight that this year is special in the life of all Panamanians, since on 31 December the most treasured wish of the Panamanian people will be fulfilled with the transfer of the Panama Canal, which as of the first day of the next millennium will be fully administered by nationals who have been preparing for this for 22 years, since the signing of the Torrijos-Carter Treaties. For this reason, among the measures adopted by the Government have been some programmes and actions to discourage migration to the Interoceanic Region in order to protect the Canal basin.

Over the last five years, social expenditure by the Government has increased steadily; the average per capita is 250 dollars, and the ratio between social expenditure and the gross domestic product has remained around 10 per cent. Given the need to pay particular attention to the most vulnerable sectors, in 1997 the Ministry of Youth, Women, Childhood and the Family was set up with the general objectives of promoting human development through participation and promotion of equity, as well as through the organization, administration, coordination and execution of policies, plans and programmes designed to bolster the family, the community and groups requiring priority attention. Under the impetus of this Ministry, the National Council for the Family and Minors has been set up, together with the National Council for Women and the National Council for Youth, which will encourage organized and positive participation by civil society.

At present, the country has a low level of fertility, approximately two children per woman. However, there are significant differences within the national territory. In rural areas the average is almost double that of urban areas. This situation has led to the preparation of measures in the area of sexual and reproductive health, since it is clear that the country does need to give attention to the territorial differences in fertility rate.

In this respect, it is important to mention that the National Commission on Sexual and Reproductive Health has been set up with the participation of Government institutions, non-governmental organizations, indigenous groups, parents, organized young people and adolescents, adults, teachers, professional associations, unions, communications media, legislative bodies and religious groups at the highest level. At the same time, through a series of consultations and in consensus with these groups, the National Plan for Sexual and Reproductive Health has been developed through a process of mobilization and coordination of governmental actions and civil society, under the auspices of the United Nations Population Fund and the Pan American Health Organization, which marks a milestone in our history. This Plan promotes the development of integrated, high-quality services for better coverage of the population throughout the national territory.

The concepts of consultation and coordination define the approach for promoting sexual and reproductive health and offer an opportunity for society to play a responsible, active role in attaining health. At the same time, they channel the consciousness of governmental organizations and civil society in order to secure innovative, concerted, intersectorial and multisectorial actions designed to permit a satisfactory sexual and reproductive life at the individual, family and social levels in a climate of equity which promotes healthy and whole lifestyles.

Panama is one of the countries of the Latin American region with a large proportion of resources dedicated to education, a sector in which policies have been adopted and actions carried out to attain a higher level of instruction in order to raise the level of life of the population.

Among the actions taken in this period, it is important to highlight the coming into effect of the Family Code in January 1995, the approval of Law Number 2 establishing that a minimum of 30 per cent of candidates for popular elections should be women, Law Number 27 which deals with crimes of domestic violence and child abuse, Law Number 50 which promotes breastfeeding, and finally Law Number 4 of January of this year, which establishes equal opportunities for women.

In the area of information, I should note the preparations for the census of the year 2000, when for the first time we will be using modern techniques such as automated digital mapping, which will make it possible to move towards a geographic information system.

Finally, it is important to note that based on results of the latest surveys, a new strategic approach has been devised to tackle poverty for the 1998-2003 period. Panama thus reaffirms its commitment to the plans of the Programme of Action adopted in Cairo and reiterates its support for the efforts currently under way to meet the established goals and achieve a better quality of life for the world's people.

The President: I now give the floor to the Minister for Planning for Chile.

Mr. Quintana (Chile) (*spoke in Spanish*): An analysis of the processes established and the obstacles overcome during the first five years of implementation of the Programme of Action of the International Conference on Population and Development will show that our country has made significant progress and in turn faces major challenges. Chile is in a process of advanced demographic transition because of the decline in our fertility, birth and death rates since the 1960s, which has resulted in population growth rates which are also low, 1.4 per cent natural increase per year. The decline in fertility has been the variable with the greatest effect, having gone from five children per woman in the 1960s to 2.4 in the 1990s. If this trend continues, we estimate that in 2020 we will reach replacement level. The consequence has been a reduction in the population under 15 and a relative increase in those over 65.

Although our country has no explicit population policy, the population variable has been considered in formulating social policies and sustainable development programmes and in allocating public resources to them. The Government has adopted rights-based policies in which the fundamental aspect is to establish what people need and to involve civil society as much as possible in determining what those needs are and in assigning priority. Through public policy in the economic and social areas, we have managed to reduce poverty from 38.8 per cent in 1990 to 21.7 per cent in 1998.

In terms of its Cairo undertakings, the Government has acted principally towards attaining gender equality and ensuring the right to reproductive and sexual health. To reduce gender inequality, we would point to the creation of the National Women's Service (SERNAM), which ranks as a Ministry and has played a major role in the relevance of women's role in various areas. One major achievement was the Equal Opportunity Plan for Women, which establishes the gender dimension in defining all public policy so as to put to use women's enormous potential and the contribution they can make in the various areas of national development. To ensure that women have a say in the design and implementation of public policy, a set of activities has been developed, including in particular the Women's Parliament for promoting women's participation in decision-making in private and public life in order to identify the principal social needs, find out what women's opinion is on social policies and define ways of finding solutions to their problems.

During this period, we have developed and promoted legal reforms, having to do with the inheritance regime for marriage; domestic violence; removal of the legal prohibitions on women doing jobs previously reserved exclusively for men; labour legislation on work done by women, including domestic service, retail trade, temporary rural work; parental leave for the birth, illness or death of a child or its mother; a body of law on equality of filiation, the draft law on sexual harassment; and the ban on pregnancy examinations in the hiring of women.

In terms of specific social programmes, we can point, first, to the programme carried out by SERNAM in coordination with the Ministries of Justice, Housing, Health, Labour and Education, which benefited 18,000 women heads of household by providing subsidies and job training. One relevant characteristic of this programme is the joint action between the various sectors of the State and the way it was channelled to women through the municipalities, which enabled us to strengthen decentralization in public activities.

Secondly, in the area of domestic violence, an interministerial domestic violence commission has been set up, coordinated by SERNAM. Various public and private bodies are participating in the commission. Public officials have been trained, centres to care for victims of violence have been established and institutional networks and special police units have been formed.

Thirdly, information centres on women's rights have been set up to provide information and identify women's problems and needs that require special attention. The centres are situated in every regional capital.

Fourthly, in the area of equal opportunities at the level of sectoral policy, for the education sector we have produced non-discriminatory texts that do not distort women's role and function, and training has been given in educational practices that promote gender equality. In the workplace we have managed to extend the hours during which child-care systems operate and we are carrying out inspections of women's working conditions. In the area of women's participation, we have provided training for women in posts of responsibility in order to enhance their leadership, management and organizational capabilities. Also, we have developed information systems to promote women's rights. In terms of decentralization, we have incorporated equality of opportunity into regional development strategies and have set up regional follow-up committees for the national Equal Opportunity Plan for Women.

Among the challenges that remain in overcoming gender inequalities, we would point to the situation of women and paid work. Women face problems of access to the labour market and take jobs that are considered "women's work" in the service sector with low pay and few prospects for promotion. Having the same level of education is no guarantee of equality of access to decision-making posts, and the wage differential between men and women increases with years in education. The situation of women in families is such that in the domestic environment gender inequalities persist; under current legislation, women's rights over their children and family assets still do not equal those of men. In public life, although there has been progress, women's participation is low. Women currently make up 8.9 per cent of the legislature, 9.9 per cent of the various Government posts and 17 per cent of trade union leadership.

Despite our various successes, particularly in the field of preventing teenage pregnancies, we still need to implement much more aggressive programmes to this end and to reorient the health programmes managed by our Ministry of Health.

The Acting President: I now call upon The Right Honourable Clare Short, Secretary of State for International Development of the United Kingdom of Great Britain and Northern Ireland.

Ms. Short (United Kingdom): The Cairo Programme of Action was a landmark. It was based on the link between sustainable development and human development. It gave us the right agenda for population, an agenda focused on people and their health and on the need to improve health services to achieve the sustainable economic growth necessary to reduce poverty. At Cairo we agreed a set of important outcomes which must be achieved if we are to improve the quality of life and opportunities of millions of the poorest by 2015. We must focus today on progress towards these goals. We must move forward and not backwards. We must not waste this opportunity. Let us decide today that we will do better than we have done over the past five years.

This is not just another meeting where we argue over texts in New York: the leadership we could give could improve the lives of millions, particularly millions of the poorest women and children. Much has been gained since Cairo, but we still have far to go to achieve the outcomes that were agreed in 1994, and we must be clear that it is not good enough if we agree on desirable ends at United Nations conferences but fail to will the means to deliver them.

I want to touch briefly on five areas, the first of which is HIV/AIDS. We measure, as we all know, the progress of nations in the life expectancy of their people. HIV has robbed 20 years of life from people in parts of Africa, taking with it 20 years of development gains and threatening the survival of large numbers of children. The prospect of the epidemic rampaging through Asia and Latin America is terrible and real. But we know how to prevent HIV. Examples are being set by countries such as Uganda and Thailand. They have shown the spread of AIDS can be reversed. In the text that we will agree on at this Conference we have agreed on the action necessary to reduce infection rates. But we must be more effective in taking this action everywhere, and this means acting together much more closely. I am delighted that the joint United Nations Programme on HIV/AIDS is coordinating our working partnership with a group of African countries. We in the United Kingdom will give all the support we can to this endeavour.

We must, of course, also get the science right. A vaccine would be a major breakthrough and is probably achievable. An effective microbicide that can be controlled by women could and must be found soon. These products, as with condoms and contraception, will need to be subsidized to ensure that poor people will be able to benefit from them.

The second area is young people. Half of the 16,000 people who are infected by HIV today and every day are young, and most of them are young women. We must ask ourselves why this is. The answer is that we have shielded young people from information about sex and excluded them from the services that exist while they grow up in a culture that bombards them with images of sexuality. We must stop ignoring the truth and pretending that sex does not happen to young people. We must start living up to our responsibility to tell young people what they need to know. This does not mean encouraging early sexual relations; it is ignorance that does this. We must instead make sure young people have the knowledge and the confidence to say no until they are ready. Above all, it means that girls must have the confidence and ability to make sure that when they say no, their wishes are respected.

Loving parental guidance and support are, of course, fundamental. But we need to live in the real world and recognize that young people do have sex and that not all parents live up to their responsibilities. Indeed, one of those horrible truths is that some parents even sexually abuse their children.

If young people do have sex, they need confidential, non-judgmental services, and they need condoms. Condoms prevent unwanted pregnancy, and condoms prevent sexual infection, including HIV. So we need to make them much easier to get hold of if we wish to protect the 1 billion young people we have in the world, the largest generation there has ever been in human history.

The third area is reproductive rights. Let us ask how far women have come since Cairo and Beijing. Beijing and Cairo did not, of course, invent human rights for women, but they applied human rights to contexts and choices that matter to women in their everyday lives. It is very difficult to understand why some people find this truth so threatening. What else could have made some of our negotiations so difficult. Those who want to deny women's rights cannot hide behind culture, religion or tradition. None of the values of the great world religions or proper interpretation of any tradition or culture can possibly excuse the oppression of women.

The right to health is a fundamental human right. Reproductive health is an essential element of health. It is absolutely right that we have agreed that women refugees have a right to these services.

The fourth area is maternal health. Health systems must respond to people's needs. For women in particular, maternal health care is a priority. Nowhere is the inequality between rich and poor more starkly illustrated than in the number of women who die every year as a result of pregnancy and childbirth. At Cairo we promised to reduce pregnancy-related death, but we have made very little progress.

What have we learned from this failure? First, it is not good enough to focus on isolated safe-motherhood projects. We need to strengthen health systems that reach all areas of the poorest countries in order to reduce the dangers of pregnancy. Secondly, it is not good enough to rely on traditional birth attendants. Research shows clearly that this does not save lives. We have to train enough skilled midwives to deliver all babies and to make sure that pregnant women can get to health facilities quickly when they need to do so. Thirdly, we need to lay down standards for the kind of care women should expect and authoritative guidance on the way that health systems should perform. I believe that these are areas where the World Health Organization must take a lead.

The last area is abortion. We cannot talk about safe motherhood and the commitments we made at Cairo if we fail to recognize that abortion is a reality in the lives of tens of millions of women. We do not like this, but it is the truth. I must say that I personally find it very hard to forgive those who deny women access to contraception and drive them into the arms of illegal abortionists and then claim to dislike abortion. The fact is that women regularly risk their lives for want of a safe abortion. The truth is that most women seeking an abortion are in stable unions. The horrible truth is that not all sex is consensual and that rape is a reality. It is also true that contraceptives sometimes fail.

Something is deeply wrong when countries that can spend only $5 per head or less a year on all health needs, that battle to provide the most basic treatments for malaria and tuberculosis, have hospital wards full of women being treated for the complications of unsafe abortion. Something is wrong when we jail women who need care and compassion because they were so desperate they risked their lives in an illegal abortion. We must remember that we have already agreed at Beijing that in order to protect women's health we should all review our laws on these questions.

Let me be clear: abortion should never be promoted as a means for family planning, and we should all work to minimize abortion everywhere. This is one of the reasons we must do everything we can to reduce the rates at which unwanted pregnancy occurs. That is why the milestones for contraceptive choice in this document are so important and why we are right to have asked the United Nations Population Fund to take global leadership in helping countries achieve contraceptive security and give choices to the 200 million couples who still have no choice at all.

That is why emergency contraception should be more widely available. Emergency contraception does not cause abortion. That is untrue. It ensures that fewer abortions happen. Surely we can all agree that that is desirable. But when a woman does decide that she does not wish to go through with an unwanted pregnancy, she needs services and care that are safe, accessible and respectful of her decision. She is the one who is best placed to make the moral decision that this involves.

In conclusion, at Cairo we agreed to put people's well-being and rights at the centre of our agenda. We agreed about the critical role of health, including reproductive health, in the relationship between population growth and poverty reduction. We know now that investment in health brings long-term development returns: healthier, better-nourished children, healthier women in control of their lives, national economies able to invest in improved services for their people because they have stopped living with a continuous growth of poverty as population growth outstrips economic growth — and a world that can properly feed and care for all its children.

The United Kingdom is doing its best to play an increasing part in this. We are seeking to work with countries that are committed to developing stronger, more efficient and effective health systems that care for all their people. United Kingdom development assistance is on the rise. We want to work in partnership with those who share our commitment to poverty reduction and social justice and who are committed to working effectively to achieve progress. This includes having enough respect for the poor of the world, most of whom are women, to ensure that they are able to control their own fertility, have healthy, wanted children and be able to live to see them grow up as educated and creative citizens.

The Acting President: I now call on the Minister of Family Affairs of Nicaragua, Mr. Max Padilla.

Mr. Padilla (Nicaragua) (*spoke in Spanish*): As I participate in this very important event, which unites us in our common aspirations for the well-being of all our nations, I wish to begin with a warm fraternal greeting from the people and the Government of Nicaragua.

Under our laws and in recognition of the inherent rights of every human being as set out in the Universal Declaration of Human Rights, in the American Declaration of the Rights and Duties of Man, in the

International Covenant on Economic, Social and Cultural Rights, in the International Covenant on Civil and Political Rights, in the Organization of American States (OAS) American Convention on Human Rights and in the Convention on the Rights of the Child, all of which are embodied in our Constitution and in our binding commitments, the Government of Nicaragua is determined to continue to implement the Programme of Action adopted at the International Conference on Population and Development.

A priority for the Government of Nicaragua, in which it is intensely involved, is to improve the living conditions of all Nicaraguans through social and economic development. We understand that our task is not an easy one. Our problems are great and their solutions are complex. I shall not enumerate all our ills, but it is important to mention the aftermath of a revolution, a decade of civil war and, more recently, the extensive damage caused by Hurricane Mitch — a misfortune we share with other countries of the Central American region. These make it difficult for us to fulfil our present and future commitments in the areas of education, health, nutrition and production.

Most of our population lives in poverty, yet in keeping with the Programme of Action of the International Conference on Population and Development, we want to continue to put people first. The Government of Nicaragua recognizes that its most valuable resource for development is its people: every girl, boy, man and woman, young or old. We know that each one of them, with his or her dignity and potential, given the proper access to education, health and work, can become an agent for greater development and for common well-being. It is for this reason that my delegation applauds all the objectives of this new stage of the Programme of Action in the fields of education, basic health and other social services.

We know that globalization presents great economic and social challenges for Nicaragua, and we acknowledge population issues as one of the important variables in development. Following the Cairo Conference, Nicaragua promulgated a national population policy as part of the Government's strategy for attaining social and economic development. This policy is being pursued in a responsible manner not only by the official sector, but also by civil society. Our population policy falls within the Government's commitment to reduce poverty through policies that make services such as education and basic health care more readily available to the poorest groups. That policy also encompasses all the components of population dynamics, such as mortality, fertility, internal and external migration, human settlements, urbanization and population distribution within the territory as they relate to economic and social development, natural resources and environment.

Likewise, the general guidelines of our national population policy promote activities to put the family at the centre of programmes directed to specific population groups, taking into account gender, age, social status, ethnicity and vulnerability as well as placing a high value on education and training from infancy. The population in general, and fathers and mothers of adolescents and young people in particular, are encouraged to participate in integrated sex education activities and in education for family life, in keeping with their right to participate in determining the content of this education. This should be done in a way that promotes a climate of mutual respect and tolerance for the norms and values upheld by our society. Our integrated sex education programmes are also geared towards preparing young people so that when the time comes they will know how to live as responsible mothers and fathers. It also seeks to educate them concerning life within the family.

Our population policy promotes integrated sex education within the framework of our culture, our moral values and the exercise of self-control, self-care, self-esteem, fidelity and responsibility. It also takes the view that young people and adults of both sexes must be fully and truthfully informed if they are to make free decisions about methods of avoiding unplanned pregnancies and reducing the risk of contracting sexually transmitted diseases and HIV/AIDS.

Abortion is considered a criminal act in Nicaragua and is prohibited under the law. We recognize the moment of conception as the beginning of a new life.

With respect to the empowerment of women, our Constitution acknowledges the equal dignity of men and women and, thus, their equal rights. It also mandates equal pay for equal work under the same conditions. A greater awareness of a woman's right to equal opportunity in all spheres of society without gender discrimination is being promoted both by the Government and by civil society.

In short, our population policy comprises a set of measures aimed at influencing reproductive behaviour: education, training, promoting the sexual and reproductive health of our population, promoting the values of Nicaraguan society, the right to life from the moment of conception, access to education and basic health care, the irreplaceable role of the family and the social and cultural survival of ethnic groups. Clearly, the family is an important element of our national population policy. That is why we do our utmost to promote dialogue between generations and to provide the necessary support for the family. For us, the family is still the "natural and fundamental group unit of society and is entitled to protection by society and the State", in the words of article 16 (3) of the Universal Declaration of Human Rights, and as specified in our Constitution.

Our concern to preserve the family's value for society is shown by the initiative that our President, Arnoldo Alemán, took last year in creating the Ministry for the Family, which seeks ways to work with civil society to strengthen that institution against all that is weakening it. It is our belief that every child has the right to a father and a mother who will love, care for and provide a stable environment for it. The Declaration on the Rights of the Child, although not legally binding, was quoted in the preamble to the Convention on the same subject:

> "the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth". [Resolution 44/25]

The Nicaraguan delegation therefore regrets that a more relevant place was not given to this subject in the review and evaluation of the Programme of Action we have been working on since March.

Nicaragua knows what a delicate task it is to shape a common and effective path out of the ills afflicting developing societies. Once more, Nicaragua is rising to the challenge involved in the task of integrated human development, cleaving to the values that in the past have given our people the strength to overcome crises and other difficult circumstances. The integrity of the family, the right of a new life to reach its potential, personal moral development, the potential of women and girls, and the responsibility of men are some elements that will continue to guide Nicaragua in implementing of this new phase of the Programme of Action of the International Conference on Population and Development.

The Acting President: I now give the floor to Her Excellency The Honourable Georgina Te Heuheu, Minister of Women's Affairs and Associate Minister of Health of New Zealand.

Ms. Te Heuheu (New Zealand): "Listen to the North wind blowing from the great Hawaiki". This saying reminds New Zealand Maori, of whom I am one, that we sailed from other parts of the Pacific Ocean to locate in New Zealand, where we identify ourselves as *Tangata Whenua*, the people of the land.

The importance of identity in recognizing the needs of indigenous populations especially is one of the particular matters on which my Government places a high priority.

I am honoured to address the General Assembly today as the first Maori woman to do so as a member of my Government's executive. Today, I reaffirm New Zealand's commitment to the important goals of the International Conference on Population and Development (ICPD), as agreed in Cairo, and to the further advances made in Beijing in 1995.

New Zealand is a small country in size and population, compared with many of the countries represented here today. We have just over 3.5 million people, and women make up just over half the population. Maori women are currently 15 per cent of all women in New Zealand, and by the year 2046, they will make up 21 per cent of the population of women and 11 per cent of the total population. Their role as leaders in the future of our nation, therefore, is important to all our citizens.

The number of older people in New Zealand is increasing, and women form a larger proportion of the population over 65 years of age. These demographic trends present a challenge for New Zealand as we plan our future.

I am proud that in New Zealand we have a long history of innovative policies designed to enhance the status of women. We believe that the participation of women in all spheres of economic, political and cultural life must be achieved if women are to have full access to economic and social benefits and opportunities. The recent appointment of a female Prime Minister, The Right Honourable Jenny Shipley, to head our country's Government, gives additional impetus to that objective.

At home and on the international stage, New Zealand has sought to play an active role in the promotion of the human rights of women and to ensure their full participation in society as equal partners with men, in particular supporting and encouraging sexual and reproductive health rights and other rights of women, which are central to the Programme of Action. Recently, that support was evident in our taking a constructive approach towards the development of an Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women.

We are also encouraged to look more closely at our domestic policies to ensure that they are consistent with the Programme of Action, and to consider where further enhancement could be achieved, such as continuing to focus on education and information for young people and targeting initiatives to ensure that Maori, Pacific island people and other minority groups can enjoy improved health.

Over the last five years, our key initiatives have included improved access to contraception through the removal of financial barriers to the purchase of contraceptives and free access to contraceptive advice and counselling for groups at high risk of poor sexual health; the implementation of national cervical and breast-screening programmes; the inclusion of comprehensive sexuality education within the school curriculum; resources for schools to assist them to implement sexuality education; and pilot programmes to improve the delivery of sexual health services for Pacific island people living in New Zealand. Our aim is to ensure that good sexual and reproductive health is achievable for everyone, irrespective of their sex, ethnicity or age or the place in which they live.

Strong families are at the heart of a strong nation, and our Government is committed to building a strong nation. In addition to the particular initiatives I have just outlined, the Strengthening Families programme is a strategy which joins together the health, education and welfare sectors of Government to improve life outcomes for children and families by reducing disparity. Strengthening Families aims to improve family health and educational attainment and reduce the incidence of persistent offending, abuse and neglect. This programme presents one of many opportunities for a partnership between the Government and communities.

For Maori people — as will be the case for all indigenous populations — our efforts are also designed to accommodate individuals as part of the group or collective, providing an added challenge for Governments when dealing with their indigenous populations. The desire of these groups is to develop in accordance with their collective values and tribal structures.

When families are healthy and able to support themselves, our nations will prosper. Sexual and reproductive health is central to the development of healthy and productive nations. Poor sexual and reproductive health comes with a cost to our nations, our communities and our peoples.

New Zealand participates actively in international development activities. Population issues are at the very heart of balanced and sustainable development. The essential message of the Programme of Action is that population issues are development issues, and the Programme should be considered part of a global framework for sustained and sustainable development.

New Zealand is committed to the implementation of the Programme of Action in its official development assistance programmes, and has participated actively in a number of international population activities. We have substantially increased our contributions to the United Nations Population Fund and the International Planned Parenthood Federation. We are now also supporting the important work of the Population Council.

New Zealand is a Pacific nation, and I want to acknowledge my colleagues from the South Pacific who, like me, have travelled over the Pacific Ocean to be here for this gathering. In our development assistance programme, and especially within our immediate neighbourhood, the Pacific region, we take our lead very much from our country partners. This process of consultation underpins New Zealand's approach to partnership and development, and in this context we have supported projects in the sexual and reproductive health area and the related gender and development area, among others.

New Zealand places great emphasis on gender and development, which illustrates our integrative approach to the Programme of Action. New Zealand has for some time focused on the recognition of women's rights, choices and well-being; these are the cornerstone of the ICPD agenda and are critical to women's equitable access to development.

One of the clearest violations of women's fundamental human rights and freedoms, and a major obstacle in the achievement of equality and development, is violence against women. It is universal, and yet many countries have no policy or legislation on violence against women. In New Zealand we have recently introduced such legislation, and in addition we support programmes to combat domestic violence in other countries.

In conclusion, may I say that, as we come to the end of the twentieth century, we collectively face a significant challenge. Gathered here as the representatives of our nations, we must take this opportunity to renew our commitment to the Programme of Action and to further build on the gains we have made since then to ensure the future well-being of our global community. It has been a privilege to stand before the Assembly today and present New Zealand's message to this forum.

May peace be with us all.

The Acting President: I now call on Her Excellency Mrs. Mervat Tallawy, Minister for Social Affairs of Egypt.

Mrs. Tallawy (Egypt) (*spoke in Arabic*): Allow me to convey to the Assembly the greetings of our President, Mr. Hosni Mubarak, and to express the gratitude of the people and the Government of Egypt for the efforts of the United Nations, particularly the United Nations Population Fund (UNFPA) under the leadership of Mrs. Nafis Sadik, for their efforts since 1994. They deserve all of our appreciation and gratitude.

Cairo was honoured to host the International Conference on Population and Development (ICPD) in 1994. Egypt, in its belief in the historic and leading role of civil organizations in our country since 1821, cherishes its own authorship of the idea of convening a parallel conference for non-governmental, civil organizations in Cairo.

The conclusions we drew at the Cairo Conference were important landmarks on the road towards a new era of international cooperation and understanding of the issues of population and development, which we must sustain and maintain. Hence Egypt, as the host country of the Cairo Conference, is acutely interested in the results achieved over the past five year and in the remaining obstacles and challenges at the international and national levels.

At the international level, I wish to make certain observations on the role of the international community and its importance in consolidating States' efforts in the field of population and development. Among these is, first, the importance of the developed countries' meeting their commitments by providing assistance to implement the Cairo Declaration, since there remains an enormous gap between what was pledged and what has been provided. Indeed, some of this assistance has declined.

Second, the World Bank should rely on social indicators — and not on economic criteria alone — when it establishes the regulations of the International Development Association to provide soft and easy loans and assistance to developing countries. In this way, the developing countries can achieve the required balance between economic and social development. We all need to review development indicators as the World Bank lays down criteria for human resources development on the basis of gross domestic product. Scientific studies have shown that there is no automatic or inherent relationship between an increase in a country's income and its development. It was on the basis of this concept that Amartya Sen was awarded the Nobel Prize for economics.

Third, we must maintain the coordination and integration of the comprehensive social development programmes of international organizations and donors in order to enhance revenues for recipient countries and peoples.

Fourth, it is essential that the international community be prompted and encouraged to activate cooperation between the countries of the South.

Fifth, respect must be ensured for the concept of partnership between the parties to development — government, the private sector and civil society — in order to implement national programmes and policies for population and development without disrupting the balance between them or dividing developing societies into governmental and non-governmental sectors.

Sixth, the rights of migrant workers must be respected in those countries that require their labour because their own population is in decline.

Seventh, international attention should not be diverted from providing assistance to population and development programmes to contingent political issues raised by internal strife and civil wars. The needs of each programme should be addressed without affecting those of the other.

At the national level, Egypt believes that the issue of population and development requires a comprehensive approach to the multiple aspects of development. We are therefore striving to address development at all levels, including the building of new cities to alleviate population density and the transformation of the desert by large-scale projects that employ many workers and that create new employment opportunities for future generations, such as the Toushki project in the western desert and the rehabilitation and repopulation of the Sinai and the Red Sea coast south of the Nile valley.

On this basis, Egypt is currently preparing to convene a national conference for social development aimed at formulating a new social contract based on full partnership and coordination among all concerned partners in the social development process. Indeed, Egypt has initiated a number of social reform programmes in the areas of education, health, environment, social affairs and even rural development in order to raise the standards of living of its citizens, the axes of development and its goal.

Egypt believes in promoting the welfare of the citizen. Since 1969, it has pursued a population policy to which it is committed. The Government has had a number of successes, among which are the following:

First, through the programmes implemented by the Ministry of Health and Population, the rate of use of family-planning methods has risen from 24.2 per cent to 54.5 per cent in 1997. Likewise, the birthrate has fallen from 31.8 per 1,000 to 27.5 per 1,000 in 1997. The rate of natural deliveries has fallen to 2.1 in 1997, and the general rate of fertility continued to decline from 4.4 to 3.3 children per woman in 1997. The maternal mortality rate fell from a record 535 per 100,000 to 96 per 100,000 in 1989.

Second, Egypt has undertaken a national campaign to eradicate illiteracy, particularly among women. We attach great importance to the education of girls and have thus established 3,000 new elementary schools in our belief that education is a factor in reducing early marriages, which lead to health problems.

Third, the five-year plan has increased the allocations to maternal and childhood issues in the general state budget.

Fourth, the Government has established a pilot programme for rural areas in Egypt and for population issues within the framework of a comprehensive development programme, which we call the Sunrise Programme and which has led to the decline of migration rates from rural areas to the cities.

Fifth, the Ministry of Social Affairs has tackled a number of issues related to special groups, such as those of female heads of households, widows and divorcees, in order to raise the standard of living of poor and disadvantaged families headed by women. The Ministry works through these programmes to eliminate poverty by providing assistance, loans and training to women.

Sixth, the Government has decreed a new law on civil and non-governmental organizations that offers greater opportunities for volunteer work.

Seventh, the State is eager to issue an annual report on human development in Egypt that includes scales and indicators on population problems, to decision-makers and experts. The State is particularly interested in youth in all aspects of education, health, improved employment opportunities and housing. The State has also established a social fund for development to alleviate the effects of economic reform programmes and thereby to lower the unemployment rate, particularly among young people and to provide opportunities for entrepreneurial work. Social expenditures now account for 39 per cent of Egypt's general budget, thus achieving double the level recommended by the 20/20 initiative.

In conclusion, the issue of population and development will be with us for the next few years and well into the next century. It will constitute the real challenge for many countries and, indeed, the entire world, because increased population will entail the attrition of natural resources, which we are duty-bound to maintain for future generations, whose standard of living could well be affected if we fail. This will require close cooperation between North and South that must be translated into practical measures, including increased assistance, particularly since many developing countries — including Egypt and others — have conscientiously fulfilled their own responsibilities and more in order merely to maintain what they already have.

I take this opportunity to appeal to all countries, Governments and organizations to commit themselves to implementing the recommendations of the ICPD in this regard.

The President: I now give the floor to the Minister of Health for Brazil.

Mr. Serra (Brazil): Of the many provisions contained in the Cairo agenda, the first step to be implemented in Brazil was the creation, in 1995, of the

National Commission on Population and Development (CNPD), composed of representatives from governmental bodies, universities and non-governmental organizations, to coordinate the implementation of the Programme of Action of the International Conference on Population and Development in Brazil.

At the same time, the National Health System has been consolidated, particularly in the promotion of universal access to health care, basic care innovation and greater regulation of the private sector. This system is State-financed, universal and free of charge. It provides for about 75 per cent of the outpatient and hospital care in Brazil, accounting for more than 20 billion dollars of the public budget. The Ministry of Health plays a regulatory role in this system. Priority has been given to decentralization, family health care programmes, national vaccination campaigns and enhanced accountability mechanisms.

Reproductive and sexual rights are fully recognized as basic human rights in Brazil. Initiatives in this area include safe delivery and neo-natal assistance, cervical and breast cancer prevention, voluntary access to contraceptive methods, regulation of surgical male and female sterilization, assistance within the public health system for legal abortion and adequate treatment of incomplete abortion. The number of free pre-natal care visits in Brazil increased almost threefold in the last four years. However, major challenges still remain in that area. Further collaboration with civil society organizations will be required to guarantee information, counselling, services and follow-up on the full range of safe and effective contraceptive methods, including male and female condoms and emergency contraception.

The Ministry of Health launched the Adolescent Health Care Programme, with the goal of promoting youth health. Among the main priority concerns of this programme are early motherhood, AIDS, sexual violence, as well as tobacco and alcohol. The Brazilian Government recognizes the importance of an increased participation of non-governmental organizations, including youth organizations, in order to achieve this objective. Since 1996, the Ministry of Health has been providing free and universal access to all approved anti-retroviral medications against AIDS. Nowadays, about 58,000 men and women receive these drugs. The rapid increase in the rate of female infection recently made it necessary to give special attention to women in the fight against AIDS. As a result of the national HIV/AIDS programme, mortality rates declined about 50 per cent between 1994 and 1999.

With regard to gender equality, relevant legislative steps have been taken in Brazil. In 1997, for example, the Government enforced a federal bill stipulating that a minimum share of 30 per cent of candidates for elections at all levels must be female. Women's organizations played an important role in extending the regulation for the four-month maternity leave to rural and domestic workers. We have also prohibited the requirement of pregnancy tests or sterilization certificates in recruitment for work.

Brazil has traditionally been an immigration country, and our policies have always reflected this feature. The Government recently adopted a comprehensive amnesty for non-documented immigrants and has established the National Council for Refugees to implement the international Refugees Statute of 1951. The United Nations High Commissioner for Refugees has a seat in the National Council. Actions also have been taken in the consular area, to protect around 2 million Brazilians who live abroad, including the establishment of citizen councils.

Unfortunately, in many countries women are still unable to exercise their rights because of legal provisions. The international community must press for the removal of any obstacles against the empowerment of women arising from poverty, intolerance, illiteracy, limited access to education, inadequate remuneration, patriarchal mentality and the dual burden of domestic tasks and occupational obligations. The girl child in particular should be protected against practices and cultural attitudes that in so many countries promote sexual servitude and the low value of girls. The international community must also adopt a humanitarian approach to the issue of the AIDS pandemic. More affordable prices should be ensured for all drugs related to HIV prevention, testing and treatment.

Before concluding, I wish to call upon the international community to promote an enabling international economic environment in support for the quest of developing countries for sustainable human development. Development assistance resources are also necessary for the implementation of the cumulative agenda emanating from United Nations development conferences. An adequate volume of financing will be required from all available funding mechanisms in order to promote sustainable development, poverty eradication and the advancement of women.

The President: I now give the floor to the Minister for Population, Status of Women and Childhood from Madagascar.

Ms. Jaotody (Madagascar) (*spoke in French*): It is an honour for me to take the floor at this special session of the General Assembly on the review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD).

My delegation and I myself would like to take this opportunity to congratulate you, Mr. President, as well as all the other members of the Bureau, who are leading so effectively the work of this conference. Moreover, I would like to thank the Secretary-General for providing his various concise and instructive reports which have served as basic documents for the proper conduct of the preparatory committee's work. I would also like to express the sincere thanks of the delegation of Madagascar for the contribution of various groups as well as for the flexibility they have shown during this lengthy period of negotiations, one which has enabled us to come up with a consensus.

While we reaffirm our complete association with the Group of 77 and China, the delegation of Madagascar, which I represent, hopes that this special session of the ICPD +5 will serve as a reference point for the well being for all our populations and above all as a reference point for further, greater development.

Mr. Ampal (Brunei Darussalam), Vice-President, took the Chair.

My Government attaches great importance to implementing the Programme of Action of the ICPD. That is why it has taken all necessary measures to implement resolutions that should result in equality and equity between men and women, empowering women and improving maternal and child health. In 1998, we set up an institutional mechanism, the National Population Office, to coordinate, supervise and evaluate all activities in implementation of our national population programme. The Office is supported by the National Population Commission, which proposes national priorities in the population and development field on the basis of information from consultative bodies, namely, the Interregional Population Commissions at the regional level and the Specialized Technical Task Forces on Population in the various Government departments. Each of those bodies is responsible in its own area for defining population problems and integrating those definitions into development programmes and policies.

In terms of the advancement of women, progress has been made towards equality and equity between the sexes since the Fourth World Conference on Women, in Beijing. Indeed, my department has noted a degree of complementarity between the recommendations of the various international conferences: the ICPD, the World Summit for Social Development, the Beijing Conference and the ratification of the Convention on the Elimination of All Forms of Discrimination against Women confirm my Government's political will and the importance it attaches to the advancement of women and to article 8 of our Constitution, which guarantees equality for all without gender discrimination.

Allow me to provide a brief survey of the complementarity between the recommendations of the various conferences I have mentioned. To combat poverty, my department has set up a cooperative relationship with its technical and financial partners, such as the Cultural Cooperation and Action Service, the United Nations Population Fund, the United Nations Development Programme, the United Nations Children's Fund, the Agency for Cultural and Technical Cooperation and a social fund. The vulnerable members of the population — women, men, young people — can draw on this fund to establish microbusinesses. The objective is to contribute towards increasing their incomes so that they can pay their own way and so ensure that they have their independence. However, for this approach to be positive and produce tangible results, training in education for family life is given them with the aim of controlling fertility and planning pregnancies.

The result we seek is a better balance between mouths to feed and grains of rice available to feed them. The various strategies implemented to this end involve functional literacy, a gender-specific method of socio-economic analysis, the creation of economic interest groups, mobilization of resources and implementation of the 20-20 initiative.

I could not conclude without expressing my delegation's satisfaction concerning the new measures set out in the documents that this session will produce in following up the Cairo Programme of Action. However, it is always worth remembering that sustainable development is conditional upon a rapid stabilization of the world's population, which keeps on growing, particularly in the poor countries, where growth rates are highest, and requires, despite the progress that has been made in the last five years, the mobilization of sufficient resources from the international community, and from the donor countries in particular, to enable the poor countries to overcome their financial limitations. In this connection, we appeal also for resolute action by Governments to strengthen their political will in respect of establishing effective and transparent partnerships, both at the national level with civil society and at the bilateral level.

I must stress again the need for an increase in international assistance, which we, as a developing country, need if we are to reduce the death rate from the HIV/AIDS pandemic, from infectious or parasitic diseases such as tuberculosis, malaria and cholera, and most of all to meet the needs of young men and women for reproductive and sexual health.

I would like also to take this opportunity to address the problems of international migration. My delegation considers these to be an integral part of any discussion bearing on population and development. In this regard, my delegation supports the viewpoints on future policy directions arrived at during the 1998 Technical Symposium on International Migration and Development. Madagascar, which is especially concerned by South-South migrations, urges that an international conference be held on international migration.

Before closing, I should like to hail the relevance of the statements made by all delegations that have come to this special session to honour their commitments, and I should like to reiterate Madagascar's will to implement, to the best of its ability, the measures to be set forth in the final document of this session. We should like to see tangible results in establishing harmony between the economy, population and finance so that we can achieve sustainable human development.

The Acting President: I now call upon the Minister of Health of El Salvador, Mr. Francisco López Beltrán.

Mr. López Beltrán (El Salvador) (*spoke in Spanish*): In speaking for my country in this Assembly, I bring a fraternal message of optimism and hope from the President of El Salvador, Mr. Francisco Flores. I bring greetings to all and embrace all in solidarity.

Our participation in this special session of the General Assembly to review and assess the Programme of Action of the International Conference on Population and Development is a very pertinent matter for the current Government of El Salvador, given that the matters under discussion are of great value in their recognition that the human being is the centre of development. This is a fundamental principle with which El Salvador is in complete agreement.

Since the Programme of Action was adopted five years ago, many countries have made significant progress in achieving the targets set. In El Salvador, we have made progress in implementing the actions recommended in the Programme of Action. We have passed and implemented public policies in favour of children, adolescents and women and on caring for older persons. All this helps strengthen the family, which is the foundation of our society. Also, we have established the Salvadoran Institute for the Development of Women and have formulated a national policy on women. We have coordinated and implemented a programme to treat and prevent domestic violence. We have implemented a national reproductive health plan that includes prevention of sexually transmitted diseases and HIV/AIDS. We are applying standards for health care for adolescents, which include training for health-sector personnel at all levels. We have carried out a far-reaching educational reform that involves promoting moral and cultural values in the school curriculum. These advances, which we have presented in a very summary form, encourage us to continue working in favour of population and development.

A wide survey was carried out in El Salvador at all levels, including all the municipalities of the Republic. This served as the basis for the development of the New Alliance plan, which the current Government of the Republic will be pursuing during the period 1999-2004. This Government programme, in a climate of participation and transparency, will seek to create conditions and opportunities for sustainable development, peace, democracy and the rule of law and to reinforce the values of national identity, thereby seeking to secure the well-being, the progress and the personal development of all Salvadorans. In this regard, the country's objectives are compatible with and in accordance with those generated by various international summits and conferences and in particular, the International Conference on Population and Development (ICPD).

Guided by the recommendations of the ICPD Programme of Action, and taking into account the progress made and the recommendations of key measures to continue carrying out the programme of action that we shall be adopting at the end of this session, the

Government of El Salvador proposes to share responsibly and to work with the participation of pertinent sectors of the civil society to revise and update the national population policy to adapt it to the country's new needs and realities, thus working to promote strategic components in the framework of the New Alliance.

These components include, among others, strengthening the decentralization policy at the State level through participatory decentralization at the local level with policies, strategies and measures that will enable the State to be more effective in its delivery of public services, especially in the areas of health, drinking water and sanitation.

We are creating opportunities to advance by improving the educational level of the population, continuing educational reform, expanding coverage and enhancing quality at all levels, particularly in rural and suburban areas. We are strengthening curricular content, including that relating to population and development and sexual and reproductive health, with emphasis on education for girls.

Included also is the promotion of personal development and family integration, creating equal-opportunity conditions for women's development, which at the same time will bolster families by reinforcing programmes to facilitate their productive involvement and strengthening the measures generated by implementation of the National Policy for Women.

An additional component is promotion of and follow-up to the National Plan for Reproductive Health, with particular emphasis on facilitating access to information, education and communication on these matters by the Salvadoran population in the area of family planning, so that they may take free, conscious and well-informed decisions concerning the number and spacing of children and be sure of access to services to prevent unwanted and high-risk pregnancies and to avoid abortion. Securing the right to safe motherhood is also emphasized, along with infertility services and comprehensive care for adolescents in order to promote and develop appropriate sexual and reproductive health and the prevention of cervical, uterine and breast cancer in women and prostate cancer in men, while continuing with the national plan for prevention and control of sexually transmitted diseases and HIV/AIDS.

With regard to vulnerable groups, such as boys and girls, adolescents and young people, we will increase measures which will include care for children's growth and development, for prevalent childhood diseases and for the integrated development of adolescent boys and girls with emphasis on the prevention of pregnancy at that age. Plans will also include the design and implementation of a national policy specifically directed towards youth to promote technical and vocational training, recreational and cultural facilities and the fostering of moral and civic values that will enable them to take an active part in Salvadoran society.

Attention to the disabled and the elderly will be given in order to facilitate their participation in the family and in the community in accordance with the national policy for care of the elderly and the equal opportunity policy for the disabled.

The Government of El Salvador attaches particular importance to the study of and search for solutions to population problems — with freedom as a basis, recognizing the right to life from the moment of conception, and recognizing also values and cultural traditions, individual and social needs and the inequality of opportunity for development for men and women — in order to harmonize the demographic variables with the economic and social ones so as to promote comprehensive development of the nation.

I wish to reaffirm my Government's readiness to continue to work to fulfil the recommendations set forth in the ICPD Programme of Action, as well as the recommendations from the General Assembly. Lastly, we reaffirm that for developing countries international cooperation, both financial and technical, is vitally important in order to supplement national endeavours designed to secure full compliance with our objectives in the area of population and development.

The Acting President: I now call on the His Excellency the Honourable Misa Telefoni, Minister of Health of Samoa.

Mr. Telefoni (Samoa): May I congratulate you most warmly on your election and express to you on behalf of my Government our confidence and support for your presidency.

Samoa is an independent sovereign State in the South Pacific. Our country is committed to the principle, and the issue recognized as crucial in Cairo, that it is not the number of people that is the crucial factor but rather the standard of living of those people. A corollary to this is that the emphasis should not only be on the number of people in any country but on whether the resources of that country are equitably distributed among those people. We recognize that the best means of achieving such a grandiose objective is to work to ensure free access to education and health by all our people. We are close to achieving that objective.

Samoa is unique in the Pacific region because our strong culture is central to our way of life and impacts on our Westminister system of government. Our people's affinity with the land and the sea is based on this love of tradition and strong Christian principles which motivate and sustain us both spiritually and physically.

Samoa has, with our partner Pacific island countries, fully embraced the Healthy Islands concept promoted in our region by the World Health Organization (WHO). Healthy Islands recognizes that sustainable development in island States is vastly different from that in any other entities, and is comparable to concepts such as Healthy Cities only in its nomenclature. We have reinforced our commitment to the Healthy Islands principles by acceding to the treaty obligations in the Rarotonga Agreement of 1997 and its predecessor the Yanuca Declaration of 1995. We believe that most of the objectives of the Programme of Action are embodied in these initiatives.

Samoa believes that the main lesson from Cairo and The Hague is that people-first development means what it says: putting people first. Sustainable economic growth must focus not only on the speed of that growth, but on equitable access to it by the poorest sector of the economy. We also recognize that there can be only so much growth, for despite technological advances the Earth and its resources are finite, while the appetites of human and other life systems are not. What is needed is proper management of the important but necessary coexistence of populations, resources to ensure food security, the environment and development.

Samoa accepts and is promoting all the Cairo principles, including eradicating poverty, safe reproductive health, equal access to health services and the promotion of human rights, but most important, Samoa believes that the essential ingredient of any successful initiative is the empowerment of women. Samoa is not just a signatory to the Convention on the Elimination of All Forms of Discrimination against Women; it has integrated its principles into the implementation of Government and private-sector initiatives at all levels.

Our women are better educated; indeed, the majority of scholarship holders are women. While we still need to improve access to secondary education by women, those women who reach the top are joining the cabinet and heading the largest Government departments, and have headed overseas diplomatic missions. We believe that the proof of the pudding is in the eating; we also are the only country in the world that has a national holiday for women: the Monday after Mother's Day, in May. Our women are asserting their God-given right to control their bodies, and are making the decisions concerning the number of children they have, in keeping with their ability to shelter and school those children and with the reliability of their menfolk in helping to provide these things.

With a more educated, assertive and politically active female population, the stage is now set for Samoa to achieve progress in attaining Cairo's goals. We have close to 100 per cent access to health services. Reproductive health and family planning are integral components of our primary health care system. Our immunization coverage, at 99 per cent, is one of the highest in the world. All our maternity hospitals are baby-friendly, and generally only women who cannot breast-feed their children do not do so. Samoa recognizes that prevention is the only long-term formula for curtailing burgeoning health costs, and prevention is the key to our national health plan. We have declared war on tobacco use, and are targeting non-communicable diseases such as diabetes and hypertension as a national priority.

With a significant part of our population, some 42 per cent, under 15 years of age, a national youth policy giving priority to education is in the forefront of Government policy planning. We are working in close collaboration with non-governmental organizations in partnership strategies to promote good health for all. We are striving to provide the best health services our resources can afford, including an overseas treatment scheme for serious cases; this scheme is accessible to all.

Samoa's HIV-AIDS Council has so far kept incidence to a minimum. However, we realize that we cannot rest on our laurels, so an aggressive awareness campaign is ongoing. We have reached a workable partnership with our religious clergy on family planning and HIV-AIDS strategies. We embrace their basic principle that sexual intercourse should take place only in wedlock. However we promote the practice of safe sex, such as the use of condoms, when this spiritual goal is unachievable. Such a strategy is not only workable; it is successful. We realized early that to go against the Church's moral premise would result in a negative impact on all our campaigns for safer sex.

On 24 November 1998, Pacific island health ministers gathered in Fiji to assess the successes and failures in achieving the Cairo objectives. From this meeting, a comprehensive report was published setting out the Pacific response to the Programme of Action of the International Conference on Population and Development. This document indicates that we have all learnt much and have achieved a great deal in terms of the stated objectives. Samoa is grateful to the United Nations Population Fund, the World Health Organization, the United Nations Development Programme, the United Nations Educational, Scientific and Cultural Organization and indeed all our development partners for their assistance as we strive to achieve our main objective of making our people the primary and main focus of all development initiatives.

It is indeed a privilege and an honour to address the Assembly; we look forward to sharing our ideas for making this world a better place for all our peoples as we await the dawning of a new millennium.

The Acting President: I now give the floor to His Excellency Mr. Olexander Chalyi, First Deputy Minister for Foreign Affairs of Ukraine.

Mr. Chalyi (Ukraine): Let me begin by congratulating Mr. Didier Opertti on his election as President of the Assembly at this special session. He can rely on the full support of the Ukrainian delegation as he carries out his responsible mission.

The twenty-first special session of the General Assembly is being held at the time when mankind is about to enter the twenty-first century. On the threshold of a new millennium, we turn back to sum up what has been done and to consider what more should be done. We can state without any doubt that the International Conference on Population and Development (ICPD) will always stand in the history of the twentieth century as a milestone in promoting international cooperation and action on demographic issues.

The consensus reached in Cairo provided the international community with ample opportunities to introduce new strategies and to change our priorities in the field of population at the national, regional and international levels. The Programme of Action approved at Cairo five years ago is aimed at integrating demographic issues into the global agenda. We welcome the positive results achieved thus far in implementing that important document, in particular incorporating population policies into national development programmes, enhancing gender equality for women, promoting reproductive health and establishing effective partnerships. We should continue our joint coordinated efforts aimed at supporting the countries in need with the objective of full implementation of the decisions of the Cairo Conference.

At the same time, while identifying new strategies, we should take full account of the new tasks and challenges that have emerged in the world since the Cairo Conference. Globalization and the liberalization of the international economy and increasing integration and interdependence, as the defining trends of the 1990s, cannot but influence the demographic situation in the world. Having recognized the value of open economies, we should, however, be ready to address emerging population problems such as increasing migration including transit migration, outflow of the most productive young strata of society from the less developed economies to the more prosperous ones, drug trafficking and the spread of AIDS and other dangerous diseases, to name but a few.

The global financial crisis which severely affected many countries, including Ukraine, once again highlighted the need for integrated strategies aimed at achieving the prosperity of nations and sustainable development. We strongly believe that the United Nations has to play a central role in addressing this evolving framework. From the Ukrainian delegation's perspective, the United Nations is well placed, in cooperation with the relevant agencies of the United Nations system, to work out an international mechanism that would prevent the weakening of human potential in countries experiencing temporary economic problems.

Speaking about my own country, Ukraine, I must emphasize that we inherited from the former Soviet Union not only our well-known economic problems, but also a completely unbalanced population structure and an unfavourable situation in the areas of public health and ecological environment, including the demographic consequences of the Chernobyl disaster. All these factors caused the natural decline of the population of Ukraine, which during the last five years has dropped by almost 2 million.

By sharing these domestic problems with delegates, I have no intention of creating an impression that Ukraine needs more attention than any other country; rather, I wish to prove why my country considers the Cairo Programme of Action to be an extremely vital strategy of survival.

Proceeding from that premise, the Government of Ukraine has taken decisive measures to translate the ICPD Programme of Action into its national population strategy, that is, to make it an integral part of social and development policy, with a special emphasis on the most acute demographic problems.

The Parliament of Ukraine has reviewed the national legislation in the population field, adopting a wide range of specific laws aimed at the strengthening of public health, the encouragement of youth, the prevention of AIDS and the social protection of the people most affected by the Chernobyl disaster. The next steps will provide for introducing a system of medical insurance in Ukraine, improving infection prevention and increasing protection for the rights of patients.

Let me stress that, as Ukraine has to allocate over $1 billion each year merely to minimize the aftermath of the Chernobyl catastrophe — to say nothing of social spending — we are experiencing significant difficulties in meeting the goals set forth in Cairo. The national reproductive health and other indicators still require considerable improvement if they are to match international standards. Therefore, we would more than welcome further international assistance to this end, including through the implementation of the relevant United Nations Population Fund programmes.

The famous English novelist, George Eliot said, "The strongest principle of growth lies in human choice". We have to recognize that the ICPD was an important step; but it is still not enough. As many previous speakers underlined, our forum is meant to give new, additional ideas to international cooperation in the field of population and development.

I am convinced that by adopting the proposals for key actions for the further implementation of the Programme of Action of the ICPD, we will all be contributing to the implementation of this very important task.

The Acting President: I now give the floor to Her Excellency The Honourable Margareth Mensah, Vice-Chairperson of the National Council of Namibia.

Ms. Mensah (Namibia): Half a decade ago, world leaders assembled in Cairo, the capital city of Egypt, to address the challenges of population and development. They agreed on measures and actions to be taken by Governments and the international community as a whole in order to enable all the people of the world to benefit in a sustained manner from development and thus lead healthy and prosperous lives. Today, we are gathered here to reflect on the achievements we have made in implementing the Programme of Action adopted at the International Conference on Population and Development (ICPD) and to decide together how to overcome the remaining challenges so as not to leave any country behind as we prepare to enter the new millennium. It is in this spirit that Namibia participated at the ICPD then, and that it is doing so today at this special session.

The major national development goals of Namibia are to sustain economic growth, create employment, reduce inequalities and eradicate poverty. However, the realization of these goals continues to be hampered by, *inter alia*, the population growth rate, estimated at about 3 per cent. Thus, based on the social, economic and demographic characteristics of the population and future prospects, estimates and projections of the population suggest that the high growth rate is likely to increase further and to continue for some time.

The 1994 International Conference on Population and Development was convened barely four years after Namibia's independence, at a time when Namibia did not have a comprehensive national population policy in place. However, my Government had been taking actions to influence interrelationships between population and development in the form of population-related programmes and projects, which in turn have led to the formulation of the National Population Policy for Sustainable Human Development. This now serves as a guide to all population and development activities in the country.

The success of the Government's policy formulation is largely attributed to the wider consultations with the different groups on the nature and direction of Namibia's population policy, as well as to its acceptability and feasibility for the population at large.

In accordance with the population policy, the Government established a National Advisory Committee on Population and Sustainable Development, which serves as the highest advisory body to the Government on all matters pertaining to population and development. The Government also reviewed the composition of the Inter-Agency Technical Committee on Population, which now serves as the technical body of the National Advisory Committee, and is coordinating the five sectors of the population policy: health; gender; population development and education; population dynamics; and research and development.

In addition to the population policy, the Government has put in place a number of other policies and laws that have direct bearing on the Namibian population, particularly women, young people and children, as well as people with disabilities and other formerly disadvantaged groups. However, the availability of the financial resources needed has been a formidable challenge to effectively implementing these policies and programmes. Notwithstanding that, the budgetary allocation of our Government is a clear indication of the importance Namibia attaches to the social development of our country. For example, the allocation of total resources through the State Revenue Fund during the current financial year, 1999-2000, gives priority to education, which is allotted 26 per cent, and health, 16 per cent. This has been the pattern since independence.

In this connection, let me acknowledge the important role played by our development partners in Namibia by expressing my Governments sincere appreciation for their continuous assistance of our efforts. We also wish to express our gratitude to the United Nations Population Fund, as well as to other United Nations funds, programmes and agencies. Their role was not confined to complementing Government resources; they also supported the priority sectors set by the Government.

One of the specific objectives of the Namibia population policy is to improve the health and welfare of all Namibians. Though we have made notable strides in the process to achieve this, there are still indicators of various high mortality rates. Maternal mortality is 225 per 100,000 live births, which is quite high by international standards. Diarrhoea, malnutrition, acute respiratory infections, immunizable diseases, tuberculosis, malaria and sexually transmitted infections, including HIV/AIDS, account for the majority of deaths. HIV/AIDS is rated the number one killer in Namibia, followed by malaria. According to recent statistics, Namibia rates third among countries with the highest HIV/AIDS prevalence rates.

With an increased number of women of childbearing age infected with HIV and a prenatal transmission rate of up to 35 per cent, childhood AIDS is expected to be a serious problem. At the same time, an increase in the number of orphans, which is concomitant with accelerated mortality among adults, will require increased efforts in providing social services by government and other sectors.

As in many other countries, another crucial area that needs urgent attention in Namibia is adolescent reproductive and sexual health. The high incidence of teenage pregnancy in Namibia remains a serious development constraint. Furthermore, it has also been noted that high rates of early sexual activities lead to sexually transmitted infections, including HIV/AIDS. Most Namibian adolescents are exposed to sexually transmitted infections, including HIV/AIDS. It is therefore not surprising that the Namibian Government attaches great importance to the reproductive and sexual health of adolescents.

The major challenge to the implementation of Namibia's population policy and programmes is the lack of financial resources coupled with inadequate capacity. Simply put, no developing country can successfully implement the Cairo Programme of Action on its own. It is in this spirit that the Southern African Development Community member States have been coming together to address common population and development issues. Namibia will continue to support regional and international efforts on population and development.

Increased solidarity within the international community and the allocation of the necessary financial resources are indispensable for the full implementation of the commitment our leaders made at the International Conference on Population and Development. This calls for developing countries to be provided with both development assistance and investment in productive sectors to support employment creation and economic growth using available resources.

It is in the interest of humanity that those who are affluent today support the majority who are more disadvantaged now. Only thus can we ensure a better tomorrow for all.

The Acting President: I now give the floor to His Excellency Mr. César Hermida Bustos, the Under-Secretary-General for Health of Ecuador.

Mr. Hermida Bustos (Ecuador) (*spoke in Spanish*): Population and development are priority components of general national policy, particularly that on health. The significant internal and outward migration for economic reasons of young men — particularly to the United

States — and young women — particularly to Europe, especially Spain in recent times; high rates of maternal mortality; and the undoubtedly limited sexual and reproductive rights and the rights of women call for specific measures. For these reasons, the Ecuador State has incorporated recognition of these sexual and reproductive rights into the constitutional reforms in force since 10 August 1998.

It has also recognized the duty to guarantee the opportunity for people to decide for themselves the number of children they may have, adopt, support and educate. The Government undertakes the commitment to promote a culture that favours health and life, emphasizing food and nutrition education for mothers and children, and to recognize the right of indigenous and Afro-Ecuadorian peoples to apply their traditional systems, knowledge and practices of traditional medicine.

In the sphere of health, special emphasis has been placed on establishing a decentralized national system of universal health coverage based on the principles of equity, universality, solidarity, quality and efficiency. A few weeks ago, the Ministry of Public Health issued standards and procedures for reproductive health care, based upon the National Maternal Mortality Reduction Plan, which has received the highest level of inter-agency political support.

We are currently implementing a National Programme of Maternal Health, which includes free prenatal, natal and post-partum care, as well as care for children under the age of five. It also includes all the components of the programmes on maternal mortality reduction and other control and prevention programmes, such as that for cervical cancer.

Adolescents are the focus of the Law on Education in Sexuality and Love through the Ministry of Education, whose strategy is to incorporate a multidisciplinary approach to the sex education curriculum for young people, parents and teachers into the curricular reform. For its part, the Ministry of Health has issued a handbook of standards, procedures and conceptual bases for integrated health care for adolescents, with emphasis on reproductive health.

The Ecuadorian State has determined that violence against women is a public health problem. It has acted accordingly through the Law on Violence against Women and the Family, as well as through the National Council of Women and 17 Women's Commissioners, who act in accordance with the reform of the penal code classifyin sexual harassment as a crime.

The gender component is an ever-present consideration in the design of national policies and of national, regional and local plans and programmes.

In the sphere of sexual and reproductive health, the participation of social organizations — including indigenous, women's and youth organization — highlights significant differences in ways of approaching the needs of reproductive health and the role that the various factors play in meeting such needs. The experience and contributions of the academic world and non-governmental agencies in the areas of sexual and reproductive health have been useful to the locally developed state proposals in which they have participated.

Ecuador is making progress on specific measures aimed, generally speaking, at enhancing the quality of life. This is being carried out through inter-agency work in which external multilateral and bilateral cooperation is playing and, we hope, will continue to play an extremely important role.

My country hopes that all people, particularly women, shall be able to choose in perfect freedom, in the context of their rights, the alternatives that will enable them to develop their physical, mental and social capacities to the full, both as individuals and as members of the family and society.

The Acting President: I now give the floor to His Excellency Mr. Moses Mathendele Dlamini, Chairman of the delegation of Swaziland.

Mr. Dlamini (Swaziland): It is a great pleasure and an honour for me and my delegation to present this statement on behalf of the Government and the people of the Kingdom of Swaziland.

The twenty-first special session of the General Assembly provides us with another opportunity to review the population and development situations in our respective countries, and to further seek collective approaches in an effort to strengthen our commitments adopted at the Cairo International Conference on Population and Development (ICPD) in 1994. In our view, the initial review of the ICPD is timely in that, despite the commitments and efforts, as well as programmes, that have been engaged, both at the national and international levels, our countries continue to face serious difficulties as a result of a wide range of negative factors. Thus, there continues to be a need to bring about a balance between population growth and the capacity of our countries to provide for at least the basic needs of all our people and to ensure that people of all age groups are included — from children to youth to older persons — in order to enhance our efforts to achieve our ultimate goal of sustainable development.

For the Kingdom of Swaziland, the rate of population increase, given the fixed supply of land and limited resources, is one of the most serious threats to the future of the Swazi people. According to the 1997 population census, the population growth rate was calculated at 2.8 per cent. While this figure represents a reduction from the previous growth rate of 3.2 per cent, our economic performance still does not match our population growth. Evidently, this situation should not be allowed to continue if sustainable development is to be realized. It is for this reason that the Kingdom of Swaziland is in the process of developing a national population policy and a comprehensive reproductive health programme with the participation of representatives of religious leaders, traditional and community leaders, non-governmental organizations, academic institutions, youth and other special groups as well as experts, policy makers and planners. This is subsequent to the official launching of the National Population Council in 1998, which has since produced a national agenda.

We strongly believe that the integration of population concerns into development, environment and poverty-reduction strategies, and resource allocation at all levels with the objective of meeting the needs and improving the quality of life of current and future generations, will promote social justice and eradicate poverty. It is, however, regrettable that to a large extent, the progress made in these areas in most developing countries remains modest. This status quo is largely due to limitations in financial capacity rather than the lack of political will. This situation emphasizes the importance of international cooperation and support for the development process of these countries, particularly in Africa.

The delegation of the Kingdom of Swaziland is grateful to the Secretary-General for his report to this special session of the General Assembly contained in document E/CN.9/1999/PC/4, which provides an overview of the constraints encountered thus far in the implementation of the ICPD Programme of Action and provides useful recommendations for further action. Furthermore, we value the important preparatory processes at the United Nations for this special session, as well as the regional preparatory meetings and the experience of the International Forum for the Operational Review and Appraisal of the Implementation of the Programme of Action of the ICPD, which was held in The Hague, the Netherlands, in February 1999. The issues discussed, such as reproductive rights, reproductive health, the implementation of reproductive health programmes and women's empowerment, are viewed by my delegation as pertinent if we are to attain success.

At the subregional level, the Southern African Development Community also held a meeting from 11 to 14 May 1999 in Lusaka, Zambia, to further harness and emphasize our collective concerns and strategies for the implementation of the ICPD Programme of Action.

The ICPD Programme of Action stresses that all countries should ensure that reproductive health services are accessible to all individuals through the primary health care system by the year 2015. This is a realistic goal that Governments should meet, and they should ensure that family-planning facilities and means of contraception are provided.

At the national level, the Reproductive Health and Reproductive Rights Programme has been reviewed by the Government of the Kingdom of Swaziland to be in line with the ICPD Programme of Action, offering comprehensive and integrated services. Our reproductive health services are participatory, pragmatic and public-health based.

This programme also seeks to address the new challenges posed by sexually transmitted diseases, and HIV/AIDS in particular, which could significantly undermine the improvements recorded in the past. It is regrettable that the Kingdom of Swaziland should be one of the countries with a high incidence of HIV/AIDS. To this end, His Majesty the King has declared HIV/AIDS a national disaster, thus warranting an allocation of additional resources for fighting the disease. In view of the financial limitations we are faced with, however, the pace of response is slow, even though the situation obviously requires an urgent response. We continue to appeal for support. We are encouraged by the recent visit of Dr. Peter Piot, Executive Director of the Joint United Nations Programme on HIV/AIDS to the Kingdom, where he met with the Chairpersons of the Cabinet Committee on HIV/AIDS and the Crisis Management and Technical Committee on HIV/AIDS.

Within the context of overall hardship, the Kingdom of Swaziland has not been an exception in the quest for advancing the status of women and girls, who have been consistently marginalized. Gender issues are lately being progressively integrated into the process of development planning, bearing in mind the promotion of their economic, social, and reproductive rights.

I must point out that the six priority areas for Swaziland which were identified include feminization of poverty; reproductive health; education; women's rights; women in power and decision-making; culture, family and socialization; and the girl-child. The education sector has made major achievements in raising awareness and thus addressing the problem of gender stereotypes and negative attitudes.

While the Kingdom of Swaziland has recorded some achievements five years after the Cairo Conference, we are still faced with a lot of challenges. The formulation of the national population policy by May 2000 will usher in the real task of implementing programmes such as the Poverty Alleviation Strategy and addressing the HIV/AIDS problem and its negative socio-economic impacts, such as the increasing number of orphans and female- and children-headed households.

These and many other issues are urgent and require financial support. Inadequate financial and human resources to implement these programmes, particularly in the immediate areas of advocacy, awareness creation, service provision and shortage of commodities, pose very severe constraints. The other constraints are a consequence of lack of resources, such as reliable, adequate, timely data in support of the programmes.

It is for this reason that the Government and the people of the Kingdom of Swaziland value the assistance rendered by United Nations agencies, in particular the United Nations Population Fund, in advocating, assisting and financing, to an extent, the implementation of the Cairo Programme of Action. We are also grateful for the invaluable support of donor countries and appeal for their continued assistance.

The Acting President: I now call upon Mr. Ali Hachani, Chairman of the delegation of Tunisia.

Mr. Hachani (Tunisia) (*spoke in Arabic*): I would like at the outset to convey to you, Mr. President, my thanks for the valuable efforts you are making to ensure that this special session of the General Assembly to review and evaluate the implementation of the Programme of Action of the International Conference on Population and Development is a success. We are fully confident that your great experience in this field and your commitment will bring success to our work. I should like also to commend the preparatory committee and its chairman, the Ambassador of Bangladesh, Mr. Anwarul Karim Chowdhury, on their work; Ambassador Chowdhury and the committee have contributed directly and positively to the achievement of a consensus on the document submitted to us by the preparatory committee. The valuable and praiseworthy work that is being undertaken by the United Nations Population Fund (UNFPA) and its leader, Mrs. Nafis Sadik, is also worthy of all our gratitude and thanks.

The programme of the International Conference on Population and Development has come to occupy a special position in terms of the importance our peoples attach to it. Indeed, the Cairo Conference related population issues to development issues and has entrenched international awareness of how important that linkage is. In its commitment to the recommendations of the Cairo Conference, Tunisia profoundly recognizes that the Programme of Action of the Conference is a very important framework for improving standards of living for all citizens and achieving sustainable development. We should like to put on record the important and encouraging progress achieved over the past five years by the international community, especially by developing countries, in implementation of the recommendations of the Conference; this progress has led to dropping mortality rates worldwide, the integration of population issues into development strategies, a position of importance and recognition for reproductive health, the provision of family planning services and measures towards equality between the sexes.

Nevertheless, we do have some concerns about the deteriorating situation in some parts of the world in regard to the spread of sexually transmitted diseases, including HIV/AIDS, stubbornly high maternal and infant mortality rates, increasing poverty and the lack of basic health care and obstetric services and the equipment needed to provide them. We believe that over and above the well-known individual crises in some countries, the decline in bilateral and multilateral financial assistance for population issues and the continuing burden of debt, and the harm inflicted on many countries as a result of the global financial crisis, are having an adverse impact on implementation of the Cairo recommendations. We have great hope that this special session will provide an opportunity for us to deal with some of these shortcomings and enable us to determine why implementation has been so slow and incomplete. In this context, Tunisia would like to emphasize the need for an intensification of international cooperation in population issues, for solutions to be found to the problems and for support for South-South cooperation in the population field.

Since its independence, Tunisia has adopted a development policy according special importance to population issues. This has been supported since the change of 7 November 1987 by the adoption of many comprehensive reforms based on humanitarian principles and a deep belief in the organic relationship between population issues and development. Tunisia has integrated the recommendations of the Cairo Conference into its ninth plan for social and economic development for the years 1997 to 2001. President Zine El Abidine Ben Ali has attached great importance to this vital issue by concentrating on a social strategy aimed at eradicating poverty and deprivation and providing basic services and facilities for all citizens, including drinking water, electricity, sanitation, a sound environment and basic health care for all citizens.

The population situation in our country has undergone profound changes: developments have occurred in all the economic, social, cultural and health care aspects of Tunisian life that have changed the Tunisian way of life and standard of living completely. Behaviours have changed, and particularly the behaviour of parents, in respect of family planning and the voluntary decline in the number of pregnancies in order to provide a better future and well-being for generations to come.

The health care sector in Tunisia has witnessed a great renaissance in its services. This resulted in our winning the World Health Organization Health for All Gold Medal in 1996, thanks to our policy on health. We have also established a reproductive health programme covering all aspects of motherhood before, during and after pregnancy to ensure safe motherhood and safe infancy. The State also encouraged women to delivery under hospital care, and has provided family planning services, and encouraged a reduction in the number of pregnancies. As a result, the maternal mortality rate had dropped to 69 per 100,000 and infant mortality was down to 28.9 per 1,000 in 1997; the overall fertility rate was down to 2.38 children per woman in 1997, which is very close to the replacement rate of 2.1 children per woman. Our health care programme also covers sexually transmitted diseases and ensures early detection of breast and cervical cancer. Among its other areas of coverage are health care for women after menopause, basic services for sterile couples and intensive health programmes for young people. Tunisia has built and equipped many medical centres throughout the country, giving us a medical centre for every 700 women of reproductive age. These centres provide basic reproductive health care and family planning services. The State also provides mobile medical units to provide health care services to its citizens in rural areas and conducts public mass media campaigns to raise health awareness. All these health services are State-subsidized and are offered free of charge in the public sector and almost free of charge in the private sector.

In the area of education the State has also attached great importance to children at various stages of their growth and has adopted compulsory and free education for all children between the ages of six and sixteen. The school attendance rate of males and females has reached 99 per cent. The school attendance rate of girls in primary education has reached 47.3 per cent and has exceeded 50 per cent in secondary education. At the social level, the State has intensified social development programmes in order to eradicate poverty. In 1997, the poverty level fell to 6 per cent, compared to 33 per cent in 1966. The per capita gross domestic product increased from 119 dinars in 1966 to 2,270 dinars in 1997.

Tunisia has established many mechanisms to bring about these objectives. One of them was the establishment of a national solidarity fund to provide soft loans for the poorer classes as a means of providing them with a decent livelihood, improving their standard of living.

The positive results we have mentioned in the area of population would not have been achieved in Tunisia without granting women their full rights, which opened active participation in society and in the economic cycle.

In conclusion, I would like to reaffirm Tunisia's commitment to the Programme of Action of the Cairo Conference and its obligation to take into consideration what will be adopted during this special session and the recommendations contained therein.

The Acting President: I now call on Her Excellency, Mrs. Lois Wilson, Chairperson of the delegation of Canada.

Mrs. Wilson (Canada): Almost five years after the Cairo Conference, the issues before us are even more important than they were in 1994. The term "population and development" encompasses matters which touch upon the most personal aspects of an individual's life. At the same time, Canada sees these issues as having a direct and critical impact on the state of our global community.

We must do more to understand how population and development issues are interlinked, and we must act on those linkages. This requires open minds and a breaking down of barriers between experts, between experts and non-experts and between cultures and religions. Even if we fully implement all our International Conference on Population and Development (ICPD) +5 commitments, we will not have completed our task if we do not strengthen our capacity and our resolve to address these linkages.

At the national level, Canada believes that its vision of a sustainable health system corresponds closely to the principles and objectives of the Programme of Action. It emphasizes a comprehensive, community-based and client-driven approach to meeting people's reproductive health needs, including family planning and sexual health needs.

Within the context of our universally accessible and publicly funded health care system, Canada has adopted a population approach that strives to improve the health status of the entire population and reduces inequalities in health status between and within all groups. Our approach also recognizes that the health care system is but one factor that keeps and makes people healthy. There is a wide range of factors which influence health, such as income and social status, education, employment and working conditions, physical and social environments, and gender and culture.

In practice, Canada's commitment to meeting health needs has entailed the development of effective policies and programmes that are responsive to the diverse needs of its population. For example, a $42.2 million domestic strategy on HIV/AIDS, launched in May 1998, was developed in close collaboration with stakeholders at various levels.

The Government's Aboriginal Head Start Programme and the Canada-wide Brighter Futures Child Development Initiative assist First Nations on reserves and Inuit communities in developing and managing community-based programmes in areas such as mental health, substance abuse and childhood injury prevention.

Preparing for the health needs of an ageing population and working towards the full participation of women in economic, social, cultural and political life are two priorities for Canada. Our aim is to promote the well-being, and to strengthen the contributions, of older people in all aspects of society.

Turning to our international activities, the purpose of Canada's overseas development assistance is to support sustainable development in developing countries, to reduce poverty and to contribute to a more secure, equitable and prosperous world. The Canadian International Development Agency pledges 25 per cent of its budget to basic human needs, of which primary health care, family planning and nutrition are specifically mentioned. We accord top priority to strengthening national health systems and to improving women's health and reproductive health. We seek to address the large unmet demand for family planning and to mitigate the adverse circumstances that prevent women from having access to health care.

Central to achieving these goals is the promotion of gender equality and women's empowerment. In this area, Canada recently announced a new Policy on Gender Equality, which emphasizes gender-mainstreaming, human rights and results-based management. Its aim is to support the achievement of equality between women and men to ensure sustainable development.

In the area of migration, many developments have been positive, but there have also been horrendous crises resulting in the massive flow of refugees. We must take on the often difficult challenge of recognizing and addressing the intimate but complex links between both international and internal migration and other population and development issues. Canada is committed to continuing an active multilateral approach to migration which has as its cornerstone protection of the human rights of all migrants. Among our priorities we will be addressing the root causes of migration flows so as to make the option of remaining at home a viable one for all people.

We continue to urge the international community to respect the right of asylum and uphold the principle of non-refoulement, as well as to meet the needs of refugee women, including the recognition of gender-based persecution. We will promote the adoption of effective approaches to the integration of documented migrants into their host society, including the recognition that naturalization should normally be the long-term goal. We will play an active role with regard to concerted international action on migrant smuggling. Finally, we will call for greater attention to the protection and assistance needs of the internally displaced.

At home and abroad, Canada works closely with civil society and has widened its partnerships with non-governmental organizations, the private sector and parliamentarians. We firmly believe that relationships with civil society are critical and the five civil society representatives on our delegation have made a significant contribution to these deliberations.

Canada has also had to deal with several challenges, such as the decline in our overseas development assistance budget. In the next fiscal year this budget will be increased slightly to allow Canada to stabilize funding levels for the aid programme and indicate a return to growth in the years ahead. We will continue to work closely with our international partners to help provide higher quality health care and more comprehensive services for women.

With respect to indigenous peoples of the world, there is a degree of commonality regardless of where they live. Therefore, the development of international networks and strategies should be encouraged.

(*spoke in French*)

In conclusion, the review process is an excellent opportunity to review our objectives and priorities in relation to the needs of our country and the objectives of the international community. However, we must admit that we are disappointed at our collective international failure to achieve concrete goals throughout this five-year process.

Canada remains determined to cooperate with the international community to ensure that our efforts culminate in concrete and measurable achievements towards the goals of the Cairo Programme of Action. We want to ensure that all sectors of society, particularly those in the poorest and most neglected parts of the globe, realize tangible benefits from this process in which we are so actively engaged.

The Acting President: I next give the floor to His Excellency Mr. Jānis Priedkalns, Chairman of the delegation of Latvia.

Mr. Priedkalns (Latvia): Latvia took an active part in the International Conference on Population and Development (ICPD), held at Cairo in 1994, and in the subsequent global review process. In December 1998 a conference was held in Latvia to assess the implementation of the Conference's Programme of Action. The conference was attended by State officials, national experts and representatives of non-governmental organizations. Trends in economic development, the demographic situation, reproductive health and rights, gender equality, and education were discussed. The conclusions of this conference contributed to the production of a report which gave an excellent overall view of Latvia's follow-up to Cairo and proposed further initiatives.

Latvia attaches great importance to the implementation of the objectives of the ICPD Programme of Action, which aims to promote the physical and mental health and well-being of people around the world. We should like to underscore the importance of the interrelationship between the Cairo Programme of Action and the programmes of other United Nations conferences and summits.

Latvia's birth rate has been steadily declining. The natural increase last year was minus 6.4 per 1,000 population. Latvia's fertility rate of 1.1 is one of the lowest in Europe. To deal with these demographic challenges for a small population of 2.5 million, the Cabinet of Ministers, in the spirit of the ICPD Programme of Action, set up a demographic committee in 1994. In 1998 a national programme entitled "Latvia's Population", which provides for a systematic approach to compiling information on the entire social protection system, was developed. The programme analyzes and assesses activities in this field, and defines those problems which remain to be solved. However, Latvia still lacks resources fully to implement the activities it has envisioned.

A major achievement was the setting up of the National Health Promotion Centre to meet the goals of the ICPD Programme of Action, with an emphasis on reproductive health. Several project groups are collaborating with international organizations in this field. Many social organizations and non-governmental organizations are involved in promoting healthy-lifestyle education and have become active at the local-government level. The National Human Rights Office of Latvia is also involved in addressing the needs of the country's vulnerable groups, such as children and youth, the elderly, and persons with disabilities.

Since Cairo, reasonable progress has been achieved in the field of reproductive health. We should like to emphasize the fruitful cooperation between the

Government, non-governmental organizations and international bodies, which has resulted in increased public awareness about modern methods of family planning and an increased use of effective contraception. The number of induced abortions has decreased by one third over the past five years.

The positive trends and the gaps that still exist in the field of reproductive and sexual health are evident in the results of the survey on attitudes towards reproductive health in Latvia carried out as part of a joint project of the Ministry of Welfare and the United Nations Population Fund (UNFPA) with the close collaboration of several non-governmental organizations. The mass media also have played a substantial role in promoting public awareness about general, sexual and reproductive health issues.

Families have been affected by the sweeping changes in society since the reestablishment of Latvia's independence eight years ago. As more and more women enter the work force, especially at top levels, traditional family roles change. More responsibility for the upbringing of children is assumed by men. This fends off role-stereotyping, as children see a more balanced pattern in relations with their parents.

A number of events to promote public awareness about gender equality issues have taken place in Latvia in the last three years. The most important were the Nordic-Baltic conference held in the city of Valmiera in 1997, entitled "Women and Men in Dialogue", and the international seminar on the promotion of the status of women held in Riga this year. The latter was initiated by two outstanding female politicians: Tarja Halonen of Finland and Madeleine Albright of the United States of America. These conferences gave considerable impetus to further work both by governmental institutions and by non-governmental organizations.

At the Government level, adequately addressing gender equality issues is fundamental to Latvia's integration into the network of European institutions and to the implementation of the decisions of the Cairo Conference and of other United Nations conferences.

On the eve of the new millennium, Latvia wishes also to be seen as a country that promotes family values and the belief that strong, healthy families are the backbone of strong, healthy societies. The family unit remains an integral factor in the development of physically and mentally sound human beings and their communities.

The Latvian Government continues to design other national programmes to reach the goals of the ICPD Programme of Action. We hope that five years from now we will be ready to analyze the results of implementing our strategies and will see a tangible outcome of the Programme of Action. Here we would like to thank our partners — the United Nations Development Programme, the United Nations Population Fund, the United Nations Children's Fund, the World Health Organization, the International Labour Organization, the World Bank, the International Planned Parenthood Federation and other international bodies, as well as numerous partner countries — for their awareness of the problems typical of our region and for their unfailing support. The European Union has been instrumental in helping Latvia reform its legislation to bring Latvia closer to membership of the Union, and has been providing invaluable assistance in many other fields directly and indirectly related to the welfare of the population and to its development.

We endorse the statement of the European Union as a forward-looking document which promotes the issues of health and well-being and the rights of people everywhere. Like many other countries around the world, Latvia is hoping for a forward-looking outcome of the twenty-first special session. Much remains to be done by Latvia within its own borders, but Latvia looks forward to this session facilitating the attainment of our common goal: a healthier and better-educated world population.

The meeting rose at 6.05 p.m.

United Nations

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General Assembly
Twenty-first Special Session

Official Records

3rd plenary meeting
Wednesday, 30 June 1999, 7 p.m.
New York

President: Mr. Opertti .... (Uruguay)

The meeting was called to order at 7.10 p.m.

Agenda item 8 (*continued*)

Overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development

The President (*spoke in Spanish*): I first give the floor to His Excellency Dr. Mohammad Farhadi, Minister of Health and Medical Education of the Islamic Republic of Iran.

Dr. Farhadi (Islamic Republic of Iran) (*spoke in Persian; English text furnished by the delegation*): The Cairo Conference and its outcome, the Programme of Action in particular, constituted a historic turning point and established the organic link between population and development. The wide-ranging participation in Cairo was clearly indicative of the degree of global interest in and sensitivity to the wide range of important issues involved.

Five years later, as is evident from the intensity of debates on matters in dispute, the international community is facing formidable challenges in this field and is still grappling with the question of how to better implement the commitments undertaken in Cairo.

Let me be very clear on this point: the first and foremost objective of this special session is to remain faithful to the letter and spirit of the Cairo Programme of Action. We are here to assess the state of the implementation of that important document, take stock of achievements thus far at both national and international levels and identify the obstacles, and also to explore new initiatives and measures to further promote its implementation.

Hence, it is absolutely imperative for us all, developed and developing alike, to exploit the current propitious opportunity to advance the North-South dialogue and partnership that were the hallmarks of the Cairo Conference. The limited precious time of the special session should hardly be lavished on unnecessary and avoidable controversies surrounding highly contested new ideas and concepts.

The question of population is not a numbers game. Rather, it is about human beings and deals with such important and sensitive concepts and issues as family, marriage, reproduction and sexuality, which play a central role in the life of all societies. Since these concepts involve long-established universal fundamental ethical principles and values, their treatment can simply not be subjected to a laissez-faire, laissez-passer mentality and approach.

At a more practical level, however, population policies and programmes constitute essential elements in the overall human development strategy of each and every society. Within this context, poverty is to be considered the most formidable enemy of human development policies in general, and population policies in particular. It should be emphasized, however, that an

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enabling environment for the formulation and implementation of sound population policies cannot be limited to the national level alone. The creation and sustenance of an overall enabling environment at the international level are equally imperative, particularly in these times of unfettered globalization and liberalization.

It is generally agreed that many Cairo targets have not been met, due mainly to inadequate international assistance. This sad situation must be redressed. In fact, an important part of our success at this special session will be directly related to and contingent upon success in resource mobilization and international cooperation. The formulation of new national population policies or programmes is another priority area for the developing countries. This is the right approach and should be further encouraged and facilitated by the review process and supported by the international community. The review process should undertake to adopt practical initiatives and measures to create a safe and supportive environment for young adults and adolescents.

Let me now turn to the national scene. Having actively participated in the Cairo Conference and made its contribution to the final outcome, the Government of the Islamic Republic of Iran has since vigorously pursued the implementation of the Cairo Programme of Action. Relying on the three foundations of Islam, nationality and republicanism, the Constitution of the Islamic Republic of Iran, while respecting the rights and dignity of the individual, considers family to be the basic unit of society and social life, in which the respective rights, functions and roles of parents and children alike are defined. Our national population policy, including family planning, is based on such a definition, with due regard for the socio-cultural characteristics and development needs and requirements of the society.

At a more practical level, our strategy for family planning is based on the simultaneous promulgation of appropriate legislation, the promotion of public awareness and the provision of necessary services. These policies and measures, much reinforced by the high political commitment of the Government, led to a sharp decrease in the crude birth rate between 1984 and 1997. During the same period, the annual natural rate of population growth dropped from 3.2 per cent to 1.4 per cent.

Another important pillar of this strategy concerns the establishment of a nationwide primary health care system, which now covers 95 per cent of the country's population, including a refugee population of over 2 million people. This system delivers all the elements of primary health care, including reproductive health, as part of family health in an integrated manner. A substantial reduction in infant and child mortality rates, as well as in maternal mortality rates, between the early 1980s and 1996 is among the major achievements of the system.

The empowerment of women has been another important aspect of the overall policies of the Iranian Government over the past 15 years and has contributed significantly to the success of population policy and family planning. The Government has consistently endeavoured to promote the status of women, *inter alia*, through the promulgation of legislation, the promotion of education at all levels and the facilitation of women's participation in all areas of social life. Women's active involvement in the health sector, including in reproductive health-related activities, represents an important aspect of their active and growing role on a national scale, although much more needs to be done. The Government's commitment to the promotion of civil society in national life also aims at further buttressing women's empowerment.

In closing, I would like to stress that our national experience in population policy and family planning, the success of which has been recognized at the international level and commended this year by the United Nations, stands as a vivid confirmation of compatibility between religion and the religious outlook and population policies and family planning. Our unique experience carries important theoretical and practical lessons for other developing societies, particularly those with similar socio-cultural characteristics. In this sphere, we are willing and prepared to share our experience with other interested countries, including through the United Nations Population Fund.

I should also like to draw attention to the imperative of respect for the national cultures and particular religious values of different societies in the process of the implementation of the Cairo Programme of Action and the future implementation of the outcome of the review process. Such an approach and conduct, practised by all, would certainly provide a solid basis for sustainable genuine international cooperation.

The President (*spoke in Spanish*): I now give the floor to Her Excellency Mrs. Hilde Johnson, Minister of Development Cooperation and Human Rights of Norway.

Mrs. Johnson (Norway): The Cairo Programme of Action has caused a major shift in thinking on population issues. We are now seeing an approach to population and reproductive health based on the rights of the individual. We must put people first. We must respect human dignity and the inherent worth of every single human being.

We all know that the discussions leading up to this special session were not easy. The United Nations Population Fund (UNFPA), led by Mrs. Nafis Sadik, is to be commended for its preparations. I would furthermore like to thank the Chairman of the preparatory committee, Ambassador Chowdhury, for his tireless efforts in helping us to renew our commitment and to reach consensus on key actions. Also, the numerous non-governmental organizations should be given credit for their contributions.

Greater investment in the social sector is key in addressing the population problems. This means investing in human capital. The broader support given to the 20/20 compact is a step in the right direction. No investment is more important than that in primary health and education. No investment yields a higher return. Norway is acting on this understanding. This is a question both of money and of focus — of political priorities.

Studies show that educating girls is the single most profitable investment of all. Investing in girls' education means lower infant and maternal mortality, lower fertility and higher productivity. Educating girls will give women more control over their own lives. In addition to safeguarding a fundamental human right, educating girls and women means educating the whole family. Investing in education leads to "expanding people's choices", to use the United Nations Development Programme definition of human development.

Indeed, women must be given wider choices. Although there is still a long way to go, there are noticeable changes in a positive direction. The individual human being and her needs have increasingly become the focus of policies and, gradually, also of health services. Legislation in this field has become much more favourable in many countries. This is evidence that we are going in the right direction. The quality of care is also receiving more attention. Health services are being expanded to cater for a broader set of needs in reproductive and sexual health. Training and advocacy are being implemented. Civil society has played a vital role in promoting change and providing practical solutions. Abortion rates are going down in areas where family planning is made available. This is indeed a positive development.

There are still, however, serious problems to be solved. Among the most urgent challenges are maternal mortality that is far too high, the growing evidence of gender-based violence, lack of appropriate information and services for youth, and finally, a steep increase in HIV/AIDS. All these developments are deeply worrying. They call for renewed action, for stronger and more coordinated efforts, by all donors, by all countries, by all those with the power to set priorities.

First, the figures for maternal mortality show unacceptable differences between regions. There are several reasons for this: the general health and nutritional status of women, early marriage, lack of access to family planning and the general economic and legal status of women. But if we know the causes, we also know what measures and efforts are urgently needed to eliminate them. Safe motherhood should be promoted as a human rights issue.

Secondly, gender-based violence throughout women's life cycle is a problem of global dimensions. Not only is it widespread; it is severe. Violence against women even kills, and rape, domestic violence, mutilation and sexual abuse cause serious health problems. These infringements of women's right to health can be avoided. They are preventable. They should be prevented, in my country, as in all other countries.

The new health sector programmes represent a golden opportunity to ensure that integrated reproductive health services are given sufficient priority. Indicators of maternal mortality and morbidity should be used to monitor whether sufficient priority is being given to reproductive and sexual health. Professional assistance in connection with childbirth is a key issue. We must keep up our efforts to support these programmes.

Sexual violence is becoming a weapon in armed conflicts. Refugee women are in a particularly vulnerable situation. They are often subject to sexual violence and abuse. Maternal mortality among refugee women is often very high. In spite of this, there are numerous examples that reproductive rights have been largely ignored in times of crisis. This is unacceptable and has to be addressed.

Thirdly, adolescents are another urgent concern. This group has high figures for sexually transmitted diseases, not least HIV infection, and large numbers of teenage pregnancies and maternal deaths. This clearly shows how vulnerable adolescents are and how insufficient the response is to their needs. Teenage pregnancies carry a particularly high risk. Maternal mortality in this age group is two to five times higher than in other age groups in developing countries.

The Norwegian Government has recently presented a new plan of action for the reduction of abortions. Action targeting teenagers is given priority. A more sensitive approach and more appropriate information and services are needed if we are to reach youth. The most successful Norwegian programmes so far have involved young people, parents and the community in the planning process. Such involvement is essential if we are to reach this group effectively. We acknowledge that the question of youth is difficult for many countries, but we are confident that we will resolve the outstanding issues in this area.

Finally, the HIV/AIDS pandemic has reached a level that is reversing the favourable mortality trend of the last decades. The disease is having a devastating impact on both demography and general socio-economic development in many countries. Here, too, girls and women are the most vulnerable groups. Teenage girls are in fact the group which is most at risk for HIV/AIDS. Women need to be in a stronger negotiating position for safe sex if their health is not to be permanently damaged. Information alone is not enough. We need to bring men on board in the fight for safe sex. Men must be convinced that this is their struggle, too. This is a question of life and death for whole communities.

The spread of HIV is placing a heavy burden on the health and educational systems. There is an urgent need to reverse this trend. In this regard, international coordination is essential. What we need most, however, is strong political commitment by national governments at the highest level. This is vital if the support is to be effective. We have seen that the trend can be reversed in countries such as Uganda and Senegal. We must put these lessons to good use. The spread of HIV can be stopped. We must make a difference.

Development and demography are closely interlinked. Insufficient financial resources continue to be an important obstacle to implementation of the Programme of Action. Donor countries as well as developing countries have a shared responsibility to live up to their commitments, not only from Cairo, but from the other United Nations conferences. Donor countries have to ensure that the trend of shrinking official development assistance is reversed, and that the agreed target of 0.7 per cent of gross national product for development purposes is met. Coordination is the key word to maximize the impact of our efforts.

It is our challenge to translate words into action, to make it happen, to make a difference. As Secretary-General Kofi Annan said this morning, "The stakes could hardly be higher."

The President (*spoke in Spanish*): I now give the floor to His Excellency Mr. Brian Cowen, Minister for Health and Children of Ireland.

Mr. Cowen (Ireland): I am very pleased to have the opportunity to address this special session. I would like to add my congratulations to you, Mr. President, and to the members of your Bureau on your election. I would also like to pay tribute to Dr. Sadik, who contributed so much to the Cairo Programme of Action and to the five-year review process.

This special session is the conclusion of that process, a process that has focused attention on what we in the international community have achieved in population and development since Cairo. It also allows us, indeed forces us, to take stock of the challenges still remaining. I know that the preparation of the report of the Secretary-General for this Assembly has been a long and difficult process. I know that many members had to make hard compromises, and I pay tribute to all involved and congratulate you on the spirit of goodwill which has made this report possible.

At the outset I would like to share with you some of the pertinent changes which have taken place in Ireland in recent years. The major change relates to the sharp decline in the Irish birth rate, which indicates that couples in Ireland are controlling their fertility to a much greater extent. The birth rate fell from 21.8 births per 1000 in 1980 to 13.5 in 1998. In 1995 the fertility rate was 1.84, which is below the population replacement level of 2.1. The Irish fertility rate has been below replacement level since 1991.

Since Cairo in 1994, policy on family planning has been reviewed and new programmes developed and implemented. Each of the eight statutory regional health authorities is required to ensure that an equitable, accessible and comprehensive family planning service is available in its area. Persons in the lower socio-economic groups are entitled to family planning services, free of charge, from their family doctor. Non-governmental organizations play an important role in the provision of reproductive health services and work closely with the statutory authorities in doing so.

Other developments which have taken place include the preparation of a specific plan on women's health which is being implemented at present, and the establishment of a Women's Health Council on a statutory basis. In addition, plans to introduce organized breast and cervical screening programmes on a phased basis are at an advanced stage of planning. Screening for breast cancer will commence later this year and for cervical cancer early next year. In relation to adolescent health, a schools-based relationships and sexuality education programme has been developed. This is a comprehensive programme which realistically addresses adolescent sexual and reproductive health issues.

The issue of HIV/AIDS continues to be a priority for the Irish Government. Our strategy consists of four main components: prevention, including risk reduction and education; care of persons infected with HIV/AIDS; HIV/AIDS surveillance; and anti-discrimination.

The Cairo Programme of Action and the review process have emphasised the importance of reducing the extent of abortion throughout the world. Improved health education, access to family planning services and contraception are essential in order to bring that about. Ireland strongly endorses the principles enshrined in the Cairo Programme of Action and in the review process that abortion must not be promoted as a method of family planning. It is therefore of great importance to Ireland, as it clearly is also to many other countries, that the document recognizes that policy and legislation in relation to the circumstances in which the termination of pregnancy may be permitted, if at all, is a matter for each country to determine for itself.

Cairo was one of the great United Nations conferences of the past decade: it set specific goals and targets for the entire international community in addressing levels of unacceptable inequality and injustice in our world. These goals are interrelated and reflect the vision set out in the Charter of the United Nations. Ireland is strongly of the view that the role of the United Nations is indispensable in the achievement of the agreed international development goals and affirms its full commitment to the United Nations role in international development cooperation.

Equitable access to basic health services, including reproductive health services, is an issue fundamental to social development. Much progress has been made in improving the health of people in the developing countries. The availability of vaccines and the development of cheap and effective treatments for common infectious diseases have resulted in substantial improvements in childhood survival rates. Both bilateral donors and multilateral agencies — the United Nations Population Fund (UNFPA) in particular — have ensured that improved health and family-planning services are now available to many in the developing world.

Formidable challenges remain, however: many infectious diseases have become resurgent, new diseases — particularly HIV/AIDS — have emerged, and maternal mortality remains at unacceptably high levels in many countries. While population growth rates have fallen, and fallen steeply in many countries, there are very high fertility rates in many of the poorest countries.

The Irish Aid programme, with its strong emphasis on poverty alleviation and focus on basic needs, has given priority to the health sector. Fifteen per cent of the Irish Aid budget within our priority countries in sub-Saharan Africa is spent on the health sector, including an important reproductive health component in many of our projects.

The approach enshrined in the Cairo Programme of Action offers better health care and an improved quality of life for many millions. The support of the entire international community is crucial to ensuring that the agreement reached at Cairo five years ago represents more than just good intentions. The commitments made at Cairo cannot be fulfilled without an adequate and assured level of funding for population activities.

Ireland's overseas development assistance has enjoyed several years of sustained growth and will continue to do so. The Irish Government is fully committed to the United Nations target of 0.7 per cent of gross national product for official development assistance. Our spending on health care, including reproductive health care, will remain a high priority for the Irish Aid programme.

Ireland's strong support for the leading role of UNFPA is underlined by our steadily increasing voluntary contributions to that organization, as well as through our membership of the UNFPA Executive Board. In addition to our regular contribution to the work of

UNFPA last year, Ireland was pleased to make an additional voluntary contribution specifically earmarked for the Cairo review process. This is an acknowledgement of Ireland's support for the international consensus on population issues.

In conclusion, I wish to confirm the Irish Government's commitment to the ongoing implementation of the Programme of Action. The Programme of Action will enable us to cope with the challenge confronting the global community in the approaching century.

The President (*spoke in Spanish*): I now call on His Excellency Mr. Galwak Deng Garang, Minister of Survey and Construction Development of the Sudan.

Mr. Garang (Sudan) (*spoke in Arabic*): Nearly five years ago, this Assembly approved by consensus — which the Sudan joined — the Programme of Action of the International Conference on Population and Development. As the report of the Cairo Conference shows, the Conference was a historic event. Its outcome was a landmark in efforts to improve people's quality of life and well-being through development and population policies and programmes. The Programme of Action gave the international community a set of important population and development recommendations and objectives and also set mutually supportive qualitative and quantitative goals that are of critical importance in achieving those objectives. Featured high among these goals and objectives are sustained economic growth in the context of sustainable development; education, especially for girls; gender equity and equality; infant and maternal mortality reduction; and the provision of universal access to reproductive health services, including comprehensive family planning services.

However, it should be recalled and emphasized that the successful conclusion of these agreements was possible only because conscience and a high spirit of tolerance prevailed amongst all nations, coupled with high respect for each nation's cultures and beliefs in ethical and social matters. The delegation of the Sudan believes that there is a need, in the present process of reviewing and evaluating the implementation of the Cairo Programme of Action, to uphold and be guided by the same principles and ideals of conscience and tolerance that prevailed in the negotiations at the Cairo Conference five years ago.

Furthermore, we are of the view that what was said then by so many representatives is even more valid today for most of our societies: amongst the outstanding statements made then was one saying that in Africa the most powerful contraceptive in the world is the confidence of parents that their children will survive. How can we dispute the validity of such a logical statement in the face of the ongoing process of marginalization of the poor economies of the world? We also share the conviction of those who said that societies would have no obstacles in controlling population so long as the process upheld and respected moral values and principles. We join with those who believe that a comprehensive and holistic solution to population problems must be deeply rooted in faith and in a commitment to the basic human values enshrined in all religions and traditions. At the forefront of these values is the central role of the family as the family is the basic unit and the foundation of society. We believe this notion cannot and must not be compromised. Equally important, planned parenthood and population control must not be viewed as a universal social charter which seeks to impose the issues of adolescence, abortion and sex education on individuals and societies and religions that have their own distinctive beliefs and social values and traditions. In this context, we would like to emphasize that Governments, civil societies and non-governmental organizations should not formulate a specific social code of conduct for the young generation to become responsible citizens as, indeed, it is notably parents, particularly mothers, who are the most qualified and appropriate socializing agents in society.

The delegation of the Sudan believes that while the process of review and appraisal is conducted by the General Assembly at this special session, the international community must pay due attention to resolution 53/183, namely that the agreements concluded at the International Conference on Population and Development can be changed only through renegotiation. This is unambiguous and clear, especially in the light of the fact that the outcome of the Conference has received wide acceptance. The credibility of the entire process will be jeopardized if any attempt to act otherwise is introduced. The established practice of building consensus in the United Nations system will also suffer a setback. By virtue of such practice, any group of countries may not impose a certain course of action on other groups and may not obstruct other groups from following a chosen course of action that they view as important and useful as long as it is compatible with the generally agreed-upon international principles and norms. National population policies remain an integral part of the national sovereign decision.

Drawing on the general principles I have outlined above, I would like to comment briefly on specific issues in the draft document that contains new proposals for further action within the context of implementing the ICPD Programme of Action.

With regard to the issues of poverty, economic development and environment, we note with regret that the draft document failed to address the crucial and urgent need to establish better understanding at the international level, and a high level of international cooperation that will enable the developing countries in general and the least developed countries in particular to realize success in these fields. We also note that the international commitment to address the problem of education must be reinstated, with particular emphasis being placed in the draft document on the need to close the existing gap in male and female education in sub-Saharan Africa and in South Africa in particular. We also note with concern the exceptional emphasis in the draft document on reproductive rights.

Due attention must be paid and further measures must be taken to address basic health needs, including the need to lower the mortality rate of mothers and infants, as a matter of urgency and priority in all countries, particularly the sub-Saharan African States. Although we fully acknowledge the importance of reproductive health programmes, their implementation still requires enormous financial and technical assistance by the international community to complement the efforts made in this regard by developing countries, and the least developed in particular, since they cannot meet these demands.

As the largest country in Africa, the Sudan is a country of great ethnic and cultural diversity. Its current population is estimated to be 30 million. If it continues to grow at the present rate of 2.9 per cent, the population of the Sudan will double in the next 27 years. One of our priorities is to provide a better standard of living for citizens, embodied in the context of the population strategy included in the comprehensive national strategy which summarized the population problem in the Sudan into three basic categories: the existing incompatibility of economic growth with that of population growth, declining population characteristics, and the imbalance of population distribution. The aforementioned categories have been linked to the basic objectives of the national strategy for promoting compatibility between economic development and population growth and for improving the other categories, in order to create a better standard of living and to reduce poverty.

On the other hand, the Sudan recognizes the important role of the empowerment of women in the context of population and development strategies. Recently, Sudanese women in the Women's Development Unit of the Ministry of Social Planning produced a national plan of action to address gender equity and equality, the advancement of women, and their participation in decision-making at the political, economic and social levels, as well as the elimination of all discrimination against women. The strategy paid particular attention to the needs of women in the field of health care, particularly their reproductive health and family planning needs.

Five years after the International Conference on Population and Development, the Government of the Sudan believes that the objectives and recommendations of this Conference can only be achieved in the framework of a comprehensive peace in the country. The prevalence of peace would provide security and dignity for citizens, give them free access and mobility and ensure their enjoyment of internationally recognized human rights. To this end, the Government signed the Khartoum peace agreement in 1997 with the seven warring factions in order to put an end to the internal strife.

The Government has also sought to conclude peace initiatives and has pursued national reconciliation efforts to provide an enabling environment for the implementation of economic growth programmes within sustainable development. In this regard, I commend the United Nations Population Fund (UNFPA), which provides financial and technical assistance to the Sudan, and particularly the 1995-1996 UNFPA programme, which contributed substantially to the institutional establishment of a national population council and provided a qualified cadre for administering population growth. UNFPA continues to support the present national programme of the country. This includes programmes of reproductive health, family planning, awareness raising and support mobilization.

I would also like to mention with appreciation the efforts of all other United Nations specialized agencies that are working in the Sudan, as well as the donor countries, for their generous support and contributions. We call upon them to increase their support in order to enable the country to implement its programmes of population development for the coming years.

The President (*spoke in Spanish*): I now call on His Excellency, Mr. Gerald Ssendaula, Minister of Finance, Planning and Economic Development of Uganda.

Mr. Ssendaula (Uganda): Uganda actively participated in the International Conference on Population and Development (ICPD) in Cairo, and we are fully committed to the implementation of the Programme of Action and the recommendations of the Conference. We are continuing to mainstream adolescents and youth, to empower women and to emancipate the elderly and persons with disabilities in our development planning and to address reproductive health issues in the wider context.

We attach a lot of importance to the involvement of civil society, including the private sector, and non-governmental organizations and other stakeholders in population and development activities, including in the planning, designing, implementing and monitoring of such activities. We are also striving to ensure that population programmes put the human being at the centre of development activities and provide an enabling environment so that individuals, men and women, can play their rightful role in society. It is only through these activities that we can attain sustainable development.

In March 1995, as part of a series of post-ICPD activities, Uganda adopted an explicit national population policy for sustainable development. Priority concerns are clearly identified in the policy, and since then it has guided our programming efforts and those of our development partners, including civil society and non-governmental organizations, in this area of population and development.

Uganda has intensified its fight against the HIV-AIDS epidemic through a multisectoral approach and the use of an open policy to deal with the epidemic. The President of the Republic of Uganda went public over the issue of the HIV-AIDS epidemic and alerted the whole nation to the need to tackle the epidemic squarely. I am glad to report that our efforts have not been in vain. Over the last two years, we have begun to see a definite decline in the HIV-AIDS epidemic. This should not make us complacent. The lesson we have learnt is that although HIV-AIDS has no cure, well conceived, good and deliberate policies can be effective. Our open policy has also helped galvanize our development partners to come to our assistance. In order to make a decisive difference, the effort has to be intensified and applied persistently. The fact of the matter is that the HIV-AIDS epidemic has far-reaching implications for our population; the international community should help us to tackle it squarely.

Like other developing countries, Uganda has a largely young population. Since the ICPD, we have paid more attention to adolescents and youth. We have embarked on programmes to address the hitherto neglected needs of our young people. These include programmes to enhance our approach to adolescent reproductive life; to address the basic education and development of children, especially girls; and to make increased use of data to improve programming for youth. We are starting to see the benefits of these programmes.

The Uganda Government has identified women as a group that had been marginalized and that needed to be mainstreamed in our development process. In this regard, Uganda has put in place a national gender policy that mainstreams gender concerns in all sectors of Government and in local-government plans of action. We also have gender-desegregated data that guide planning at both the national and the district levels. Issues of equality, equity and the empowerment of women are very important to us. In order to empower women, Uganda has taken advantage of the recommendations of both the ICPD and the Fourth World Conference on Women, held at Beijing. We have put in place a process to emancipate women politically by creating special elective seats exclusively for women, from the village to the national level. As a result, we have a sizeable number of elected women Members of Parliament. Currently, we have a woman Vice-President. The civil service is also headed by a woman. Women have at the same time been promoted in the judiciary, police, prisons and other sectors of the civil service. We will continue to support affirmative action for women and to ensure education for the girl child as part of our universal primary education programme. These programmes will significantly enhance the self-esteem and productivity of our women.

With regard to harmful traditional practices that impinge on the reproductive health and reproductive rights of women, we have tackled the problem of female genital mutilation through a culturally sensitive approach. As a result, within a period of two years, we have witnessed a remarkable decline in this harmful practice in the eastern-Uganda district of Kapchorwa, where it was most prevalent. In recognition of this major achievement, the people were awarded the prestigious 1998 United Nations Population Award. We will continue with efforts to completely eliminate this harmful practice. On 3 December 1998, the President of the Republic of Uganda made a major pronouncement, urging the people of Kapchorwa to abandon this culture.

In the field of advocacy and in order to enhance reproductive health and advocacy activities, Uganda has enlisted the collaboration and support of Members of Parliament through the Parliamentary Forum on Population and Development and Food Security. Members of Parliament are now outspoken advocates of reproductive health and other population-related issues. We have also been able to reach out to both religious and cultural leaders. In Uganda, religious leaders of the Catholic, Protestant and Islamic faiths, along with the country's kings and other leaders, have also lent a strong hand to our programmes. This has widened the participation and involvement of communities in programmes that target them and has ensured ownership, commitment and the sustainability of these programmes.

Let me state that although Uganda has registered modest achievements in the field of population, Uganda's social indices remain poor by any standards. The maternal mortality rate remains unacceptably high at 506 per 100,000, while in 1995 the infant mortality rate was high, at 97 per 1,000. The contraceptive prevalence rate stood at 15 per cent in 1995 while the total fertility rate remained high at 6.8 children in 1995. Poverty stood at 46 per cent in 1996, and life expectancy is low at a mere 48 years. Clearly, therefore, we need to do a lot more to reverse these negative trends.

The Government of Uganda regards the population programme as a high priority and we have done our best to allocate considerable resources to that sector. But due to the external debt and other budgetary demands, we still need the assistance of the international community. As we strive to fulfil our commitments, we urge the developed countries to fully meet their commitments to provide the financial resources necessary to implement the ICPD Programme of Action.

The President (*spoke in Spanish*): I give the floor next to His Excellency Mr. Salah Uddin Yusuf, Minister for Health and Family Welfare of Bangladesh.

Mr. Yusuf (Bangladesh): It is my special delight to be here, participating in the twenty-first special session of the General Assembly, devoted to the five-year review and appraisal of the Programme of Action of the International Conference on Population and Development (ICPD). Bangladesh was intimately involved in all stages leading up to this special session, and I am very pleased that Bangladesh was elected to the chairmanship of the preparatory committee for the special session. Here, I would like to make special reference to the Permanent Representative of Bangladesh to the United Nations, Mr. Anwarun Karim Chowdhury, who over the past four months has been ably guiding the most difficult negotiations, as Chairman of the preparatory committee and now of the Ad Hoc Committee of the Whole.

Soon after Bangladesh was born, the father of the nation, Bangabandhu Sheikh Mujibur Rahman, for the first time declared the population issue to be the number-one concern for the newly independent nation. We have since formulated population policies and programmes as a national priority.

The International Conference on Population and Development was the turning-point in our approach to the population problem. It gave us new direction in terms of how best to integrate the issue of population with that of human development. The paradigm-shift in Cairo from numbers of people to people's needs resulted in a reorientation of our approach.

The needs of women and men — not just the pursuit of demographic targets — became the primary objectives. In order to translate the new paradigm into action, soon after Cairo, as a very first step, we in Bangladesh constituted a broad-based National Committee for Implementation of the ICPD Programme of Action. We pursued the goals through the formulation of a National Plan of Action.

In recent years, under the enlightened leadership and personal commitment of our Prime Minister, Sheikh Hasina, we have gained considerable progress in the implementation of our National Plan of Action.

A number of factors favoured the outcome of our efforts. These include the sustained commitment of the Government; maternal and child health-based family planning programmes; a cafeteria approach to providing primary and reproductive health-care services; doorstep services provided by committed grassroots-level workers; sustained partnership between the Government and non-governmental organizations, with active support from other components of civil society; the proactive role of the mass media; the expansion of education, with high priority being placed on girls' education; and women's empowerment and income-generation activities, especially through microcredit programmes.

Although Bangladesh's achievement in the population sector is considered remarkable, there is still much that we could have done. Resource constraints have been, and continue to be, the main obstacle to attaining our desired goal. This is true for most developing countries. There was some increase in the level of international assistance in the immediate aftermath of Cairo, although it was much less than the target. But in two years the flow became stagnant, and since 1998 it has started to taper off. A notable factor has been the efforts of the developing countries themselves, which have been more forthcoming in mobilizing domestic resources than has the international community in efforts assisting by making other resources available.

The donor community plays a critically important role in financing population activities. In many countries, particularly the least developed ones, funding for population activities is donor driven. Naturally, without adequate resources the implementation of the ICPD Programme of Action beyond this review will not be sustained.

The implementation of the ICPD Programme of Action is dependent to a large extent on an active partnership with the international, national and regional financial institutions and the United Nations agencies. I would like to highlight the contribution made by the United Nations Population Fund (UNFPA) in the global efforts to implement the Programme of Action. My delegation would like to mention, in particular, the commitment and leadership demonstrated by the UNFPA Executive Director, Mrs. Nafis Sadik, in carrying forward the Cairo agenda.

The major global conferences of the decade of the 1990s have given the international community a new understanding of the dynamics of socio-economic development and a new direction in which to move, with a new commitment for global partnership. The Cairo Conference was a major milestone of this decade. The special session gives us the opportunity to renew our individual and collective commitments for further follow-up and implementation of the Cairo Programme of Action. Let us work together for a better world for all of us.

The President (*spoke in Spanish*): I give the floor to Sheikh Humaid Bin Ahmed Al-Mualla, Minister of Planning of the United Arab Emirates.

Mr. Al-Mualla (United Arab Emirates) (*spoke in Arabic*): On behalf of the delegation of the United Arab Emirates, I would like to express our appreciation for the valuable proposals that were included in the Secretary-General's report and his statement presented this morning, which are related to the key measures and policies required for the further implementation by the Programme of Action of the International Conference on Population and Development, held in Cairo in 1994.

We would also like to express our appreciation for the series of meetings that has been held to assess the attainment of our objectives during the past five years.

The United Arab Emirates, represented by its wise leader, was among those countries that attributed particular importance to the Programme of Action of the Cairo Conference. We elevated it to the dimension of human development, giving it a special place in our programmes and plans and involving all segments and categories of our society, including women, who have a special place in our national development strategies and plans.

The United Arab Emirates, which has endeavoured to achieve complete development, has taken into account population questions and other essential issues, which should be based on justice and equality, respect for religious beliefs and acceptance of cultural, educational and economic traditions of every country so that we can achieve universal development. We must therefore respect the characteristics of and differences between societies and countries. It is the absolute right of every country to formulate and implement its own population programmes and policies so as to satisfy the needs of its people.

We would also like to deal with policy variations in the implementation of the Programme of Action so that cooperation and coordination can be strengthened and exchanges of experience between countries can take place, thereby contributing to global sustainable development capable of achieving man's happiness and well-being in various societies throughout the world. Creating better conditions for people and development in our world requires implementation of explicit peaceful polices that would help settle disputes and issues of occupation in many countries of the world. The persistence of such problems without finding radical solutions to them, based on the principles of the United Nations Charter and the provisions of international law, would inevitably lead to the continuation of human suffering. The international community must accord such issues of development, peace, security and stability special importance. This will require effective and objective political will on the part of all as we strive to resolve these important issues.

I wish our special session every success, and I hope that we can attain the objectives to which all our States aspire for the progress and well-being of humankind.

The President (*spoke in Spanish*): I now give the floor to His Excellency Mr. Mekonnen Manyazewal, Vice-Minister of the Ministry of Economic Development and Cooperation of Ethiopia.

Mr. Manyazewal (Ethiopia): It is a great pleasure and honour for me and my delegation to be present at this special session of the General Assembly to review the implementation of the Programme of Action of the International Conference on Population and Development (ICPD) in the past five years.

The Programme of Action adopted at the International Conference on Population and Development in Cairo has provided the opportunity for many population policies to include development concerns. It is our belief that taking development issues into account when formulating population policies would provide a framework for appropriate programmes that would ultimately yield sustainable development.

It is perhaps imperative that I start my statement by pointing out the structural changes that have taken place in Ethiopia since 1991. Three processes can be identified. The first process has helped us to put in place a democratic federal system of government. The second process is the establishment of regional Governments through the devolution of legislative, judiciary and executive functions to promote equality and participatory developments. The third key process is the transition to a market-based economic system through the implementation of new economic policies, a broad-based development strategy and programmes in the areas of health, education, food security, population, women and roads, to mention just a few. These created a conducive internal environment long before Cairo and helped us integrate our development concerns not only with the ICPD Programme of Action, but also with other plans and programmes of action that emerged from the 1990s international forums, such as the Social Summit in Copenhagen and the World Food Summit in Rome.

It is also important to note that the nature of government expenditure, both at the federal and the regional levels, has seen major changes in line with the shift in the country's economic policy and strategy. The resources allocated to agriculture, roads, education, health, energy and water have seen quite significant increases since 1991.

Coming to the implementation of our population programmes, it should be emphasized that reproductive health services are quite inadequate, due to limited access to health care, which in turn is affected by inadequate health facilities, particularly in rural areas. Health coverage is only about 50 per cent of the population. While we give priority to the expansion of health facilities, alternative systems, such as community-based distribution and social marketing, are being promoted.

In the areas of information, education, communication and advocacy, the development of an international economic cooperation strategy to better address the various sectors of society and activities undertaken to sensitize policy-makers should be seen as major works. Previously, advertising contraceptives had been prohibited by law. That particular article was cancelled recently by Parliament.

We note with satisfaction that population and family-life education has been introduced into the curriculums of junior and senior high schools, agricultural colleges and teacher-training institutes.

We accord great importance to gender equity and the empowerment of women, as reflected in the Constitution and the National Policy on Women. The fundamental changes in their political, social and economic status are key for us in eliminating poverty and accelerating our socio-economic development.

A number of non-governmental organizations and the private sector are also involved in the implementation of the Programme of Action. Their role is to assist the Government's efforts in population and related activities. Non-governmental organizations involved in reproductive health and family planning have formed a consortium and are offering commendable services to the public.

No matter how well we have done over the past five years, it is simply not significant compared with the extent of the tasks set down by the ICPD, as shown by the recent evaluations of ICPD+5 in Africa. This is due to what we call the "structural constraints" of our economies — human, institutional and financial resources — in the region in general, particularly in our respective countries. This leads me to make a number of observations regarding key actions for the further implementation of the Programme of Action.

The first observation refers to gender equality, equity and the empowerment of women. While we take note of the emphasis given in the Programme of Action, any talk of gender equality and equity will remain mere rhetoric unless we focus on changing the material and economic conditions of women in developing countries. For this, we need to take note of the important complementary role of such critical sectors as food security, rural energy, rural water supply and appropriate technology to reduce the household chores of rural women. We will not be able to bring about the increased participation of girls in primary education, however much we may increase the provision of schools in their localities, unless we make meaningful change in the aforementioned sectors.

My second observation relates to resource allocation in critical sectors of health and education. It is important to take note of the delicate balance required in priority setting and resource allocation between reproductive health and other components of the health sector, including focus on water-borne diseases, epidemic diseases such as malaria and infectious diseases like tuberculosis.

The third issue is that of the world economic situation. Globalization has continued to link economies, creating both greater wealth and growing inequality, poverty and marginalization. The implementation of the ICPD has been made more difficult to sustain in the context of this situation.

Compounding these problems, the debt situation of the poor countries remains heavy and does not provide conditions for addressing poverty or the resource needs of the social sectors. We note the call for its resolution in the proposed key future actions in the context of the ICPD. The problem is not a lack of initiatives to tackle debt problems; among these could be mentioned the Naples terms, the Toronto terms, the London terms and the Heavily Indebted Poor Countries (HIPC) Debt Initiative of the 1980s and 1990s. These initiatives are slow, not comprehensive and inadequate; at worst, they are mere rhetoric and instruments of imposition. Let's hope the current post-HIPC initiatives will do the trick.

The fourth issue is that of capacity-building to ensure the implementation not only of ICPD, but also of other complementary programmes. Although the Programme of Action calls for national capacity-building and the transfer of appropriate technology and know-how to developing countries to be the core objectives and central activities of international cooperation, a lot remains to be done. Unless we make headway in capacity-building, the Programme of Action will remain solely on paper.

The fifth issue is that the realization of ICPD objectives will also depend on what we are doing in other complementary programmes to which, like ICPD, the world community has committed itself: the Social Summit and the Food Summit.

Finally, I would like to stress that the world community is not short of programmes of action. What we are short of is their implementation. This is why we are still calling for the eradication of illiteracy, health problems and food insecurity and for poverty eradication in general. What the different parties have promised is not delivered in time. We have to save the ICPD Programme of Action from the fate of its predecessors: remaining confined to paper. This holds equally true for the complementary Programme of Action of the Social Summit and the Plan of Action of the World Food Summit, without whose implementation ICPD will remain incomplete.

Anything short of what has been promised will ultimately affect the implementation process and contribute to slowing the realization of poverty eradication to which the world community has committed itself in a number of forums. That is already being affected by unmanaged globalization, the low capacity of developing countries, debt overhang and the nature of partnership and cooperation between the developing countries and development partners. Although the Programme of Action calls for strong partnership and cooperation between the developing countries and the donor and financial institutions, we have seen a decline in official development assistance, except for in a very few countries. This situation is exacerbated by the nature of partnership and cooperation between the developing countries and many of the donors, which lacks transparency, reliability and predictability, all of which seriously undermines programme implementation, be it the ICPD, World Social Summit or World Food Programme approved programmes or plans of action.

Let us make the relationship one of true partnership and predictability. We have set noble goals for the world community against poverty. We have made statements to international forums showing our commitment to their implementation, but sadly we have forgotten about them once we have dispersed or set various conditions that go beyond reasonable bounds when it comes to making good on capacity-building. Let us show the same zeal and willingness to implement them as we have shown in approving the various complementary programmes of action. I am sure we can make a lot of difference.

The President (*spoke in Spanish*): I now give the floor to His Excellency Mr. Yigal Ben-Shalom, Director General of the Ministry of Labor and Social Affairs of Israel.

Mr. Ben-Shalom (Israel): First, on behalf of the delegation of Israel, I wish to extend our congratulations to the President of the General Assembly on his assumption of his important and honourable role. We offer him our full cooperation in making this special session a complete success.

The people and the Government of Israel are grateful for the opportunity to express our collective support for the International Conference on Population and Development Programme (ICPD) of Action. While we are greatly heartened by the progress that has been reported by the family of nations from every continent, we wish to add our voice to those who urge yet greater determination to advance the issues addressed in the report of the Commission on Population and Development. Human life is sacred in the eyes of all Israelis: we all identify with the teaching of the book of Genesis that both male and female were created together in the image of the Creator. We hope this value is reflected in my few words on action that has been taken in Israel since the 1994 Cairo Conference.

The past decade has seen an extraordinary amount of immigration to Israel, even for a nation of immigrants. The influx of over a million people, coming from a diverse range of countries and cultures, from Ethiopia to Yemen, from Argentina to the former Soviet Union, presents Israel with both a unique challenge and an exciting opportunity. Israel's population at the end of 1999 numbered over six million. This is 10 per cent larger than at the time of the Cairo Conference and more than seven times the population at the time of Israel's birth. Israel's population growth has been relatively high, averaging over four per cent yearly. Immigrants account for over 42 per cent of that figure.

Despite the challenges, Israel has been successful, both in absorbing the new immigrants and in integrating them into Israeli society, particularly into the labour force. In fact, thanks to vocational training and retraining programmes specially geared to the immigrants, their unemployment has been lowered to just slightly above the national average. Close to 100,000 immigrants have participated in vocational training — day or evening classes — at varying levels. Many have even left their old areas of occupation for Israel's well-developed high tech field.

Israel has also opened its doors to groups fleeing violent unrest. In 1977, for example, Israel accepted groups of boat people from Vietnam. In 1995, Israel absorbed a group of Bosnian Muslims fleeing the conflict in the former Yugoslavia. Most recently, Israel took in two groups of Muslim refugees from Kosovo. These immigrants received significant benefits and aid packages designed to help them rebuild their lives in Israel. Over the years, these divergent streams of cultures flowing into Israel, from developing countries as well as industrialized nations, have contributed to the unique mix that makes up modern Israeli society.

In this light, Israel also seeks to cooperate with other nations in overcoming demographic and social problems. Thus Mashav, Israel's Centre for International Cooperation, offers hundreds of training courses, attracting 4,500 trainees from some 130 countries around the globe. The courses cover a wide range of topics, from state-of-the-art agricultural techniques to vocational and special skills training. One of the training centres in Israel, the Golda Meir Mount Carmel International Training Centre, has brought in 7,050 participants, from countries in Asia, Africa, Europe, Latin America and the Caribbean, to attend some 300 courses for women engaged in community development.

Israel has also sought to fulfil another principle it holds dear, as stated in the Declaration of Independence: "Israel ... will foster the development of the country for the benefit of all its inhabitants ... based on freedom, justice and peace as envisaged by the prophets of Israel; it will ensure complete equality of social and political rights to all its inhabitants irrespective of religion, race or sex."

In particular, Israel has recently made strides towards bridging the gender gap: for one, Israel's parliament passed a law establishing the National Authority for the Advancement of the Status of Women, as well as a law preventing sexual harassment in the workplace. National authorities have also worked to further enforce the Equal Employment Opportunities Law of 1988, ensuring that there is virtually no advertising that uses gender discrimination. In addition, new legislation has been enacted to protect women on maternity leave. This includes a 1998 amendment to the Employment of Women Law of 1964, as well as the

National Insurance Law. For example, during a 12-week maternity leave, women in Israel now receive a full 100 per cent of their salary.

Meanwhile, Israel has been placing special emphasis on investigating and fighting domestic violence. Significant progress was made in these past few years, as legislation was passed to protect women in situations of abuse. For example, a woman may now obtain a protective order to remove an abusive spouse from the home. Marital rape is now recognized as a crime. Police procedures have also been enhanced to better handle cases of domestic violence against women and children. Israel is one of the few nations in which a police officer is authorized to continue investigating cases of domestic violence even after a complaint has been withdrawn. In addition, Israel has provided an increased net of shelters, along with improved legal aid, for victims.

Yet, an equally high priority must be long-term measures to prevent domestic violence before it takes root. This calls for a broad campaign to educate the public about domestic violence and, in particular, to institute preparatory courses before marriage. On the initiative of the Council of Women's Organizations, the Ministry of Education and the Authority for the Advancement of Women have come up with a new project to combat domestic violence by working at the early childhood level. This project focuses on kindergarten children, so as to identify certain types of violent behaviour at this early stage and begin educating against violence at that level. In this context, Israel launched a separate national project aimed at protecting children's rights, focusing on advanced preventive, emergency and therapeutic care to children in danger of abuse.

Israel is also intensifying its efforts to reduce unemployment, an unfortunate byproduct of the mass immigration. In this endeavour, Israel has chosen to fight the problem at its roots, and that means education. The wisdom of this approach has already proven itself, albeit on a small scale. The Israeli educational and social authorities recently mobilized their efforts to provide vocational training and similar aid packages to areas with an unemployment rate of 10 per cent or more. Already, the rise in the potential workforce in these areas has helped to attract investors and prospective employers. This was underscored most recently by the newly elected Prime Minister of Israel, Ehud Barak, who called for taking special steps to close the social and economic gaps in Israeli society that begin with childhood. He named free higher education as a top priority of his new Government.

We are still coping with basic problems like unemployment, whose effects are clear and measurable. But in the long term, the added value of broadening our education system and integrating new waves of immigrants is beyond calculation. We believe that the current strains are, if you will, the growing pains of a new society just beginning to emerge from the rich diversity of peoples and cultures that are everyday changing the face of Israel.

The President: (*spoke in Spanish*): I give the floor to Mr. Aldo Carreras, Under-Secretary for Population of the Argentine Republic.

Mr. Carreras (Argentina) (*spoke in Spanish*): After intense months of work, we are meeting once more with the task to discuss and find answers to the complex challenges posed by population and development issues. We have considered many variables in order to define future paths of action. These meetings were convened in order to evaluate the implementation of the Cairo Programme of Action, which deals with several issues related to population and development. That is why, when we do this evaluation, we cannot set aside any of these issues nor ignore the Principles that guided the Programme of Action.

The recognition of the wide range of elements involved in development must seek to improve the quality life of everybody by requiring the establishment of a common ground with full respect of different ethical, religious and cultural values.

Development should be human-centred and, since the well-being of people presents many sides, any approach to development should be multi-dimensional. Consequently, every formulation of national, regional and international strategies, actions and policies should be founded on integral and integrated perspectives. This has been clearly reflected in the Principles of the Programme of Action, which were accordingly developed in each of its chapters.

We are focused on the well-being of the people as the primary concern of development. Therefore we cannot fail to mention, among our fundamental goals, the eradication of poverty, the fulfilment of the basic needs of all human beings and the protection of their universal human rights and basic freedoms, including the right to development. Hence, social progress cannot be one variable subordinated to economic growth; rather the opposite: the economy must be at the service of human beings, an instrument for social development. The public, and not the economy, is the central concern of development.

One of the fundamental principles that has been most discussed in this forum is people's freedom to decide the number and spacing of their children. The right to a truly free, responsible and voluntary choice can be enjoyed only in contexts where there is access to education, health care and employment.

Argentina would like to recall once again that what has to be eradicated is poverty, not the poor. Even those who are still prophesying today — as they have for so long — the disaster of the population explosion have to admit that development is the best remedy to the spectre of overpopulation.

Reproductive health is a major concern in the context of overall health, but reproductive health must not be equated with the concept of birth control as a magic formula for development, and even less so must it end up displacing the core components of development, which should be at the heart of our conferences. In this connection, we believe that too much time has been devoted to reproductive health aspects and not enough to the development aspects. Simply to note the number and diversity of the problem areas incorporated into the Cairo Programme of Action in 1994 is to realize that in the past few years some aspects have been greatly emphasized to the detriment of others that are as or more important and sensitive for many of the countries represented here.

At this point we should recall the notion proposed by the United Nations, in the 1987 document of the Department of Economic and Social Affairs entitled "National Family Policies: Their Relationship to the Role of the Family in the Development Process", to the effect that family planning implies provision of education not only about contraception but also about fertility, education for family life, parental responsibility, sexuality and so on. That document says that the term "family planning" has been used to describe a much more limited approach that emphasizes the provision of contraception services in order to achieve population control, and that this point of view is much more concerned with achieving targets at the macro scale than with serving the needs of individuals. In this context, we would reaffirm once again the principles that for the Government of Argentina are irreplaceable in the area of population and development.

First, the objectives in this area must fall within the jurisdiction and under the sovereignty of each country, in keeping with the foundations and orientation of its national policies and guided by respect for human dignity and the free and responsible decisions of individuals.

Second, development assistance must not be made conditional on the adoption of particular programmes, incentives, disincentives, targets or quotas of any kind in population matters. The principle of voluntariness, meaning a complete absence of coercion in the implementation of family-planning programmes, is a basic principle of the Cairo Programme of Action.

Third, as principle 9 of the Programme of Action emphasizes, a priority objective of any population policy must be the promotion and protection of the family and the recognition that the family is the basic unit of society and is therefore a fundamental social good. Social policies must aim always to provide it with the most appropriate framework for its development. Among family rights it is of the utmost importance to safeguard the prior right of parents in respect of their children's education, as established in the Universal Declaration of Human Rights.

Fourth, that there is an intimate relationship and interdependence between development and education is beyond dispute. This relationship has a positive and direct influence on health conditions. It has been shown that basic education for women is strongly reflected in lower infant mortality indicators.

Fifth, policies must be encouraged that increase life expectancy and improve people's overall health. Family planning is worthwhile only insofar as it improves quality of life and, in this context, it is quality of life that must be the backbone of any implementation of family planning policy.

Sixth, the family is the natural and fundamental unit of the community and as such must be protected by society and the State. Only when the rights of the family are recognized and promoted can there be genuine development. In the context of this development, human life must be respected from conception until natural death. This principle cannot be altered either by legislation or by population policies. Argentina therefore does not accept the inclusion of abortion within the concept of reproductive health either as a service or as a method of birth control, just as the Cairo Programme of Action maintains.

Seventh, the ongoing promotion of women's inclusion in all types of social, economic, political and educational activity is crucial for strengthening equality of opportunity between men and women and also contributes to the overall development of our societies. Discrimination against women violates the principles of equal rights and respect for human dignity, which are the foundation of justice, freedom and peace.

Eighth, migratory policies must aim to ensure effective regulation and channelling of migratory movements, seeking a harmonious integration of immigrants that is in line with the preservation and safeguarding of the living conditions of the local population, their employment rights and the working culture of each country. It is therefore essential to continue making progress on developing and implementing specific measures to protect the rights of legal migrants while at the same time combating those who promote and profit from illegal immigration.

Ninth, among the problems associated with structural changes in population, we would highlight the problem of population ageing — the problems of older people and their material needs, health and emotional well-being.

Tenth, in terms of international technical and financial assistance for financing population and development activities, greater commitment is needed from the international community, in particular the multilateral organizations and the donor countries, so that more resources can flow into social investment, especially for education and health and all those other areas that contribute to meeting people's basic needs in full.

For all these reasons, Argentina will not allow an occasion of such importance as the one that brings us here today, five years after the Cairo Conference, to pass without reaffirming its commitment to the quest for equity and social justice as the fundamental and irreplaceable goals of any population and development policy.

The President (*spoke in Spanish*): I call on the Vice-Minister for Population and Migration Services of Mexico, His Excellency Mr. José Angel Pescador.

Mr. Pescador (*spoke in Spanish*): Five years after the historic Cairo International Conference on Population and Development, Mexico wishes to reaffirm its commitment to the principles and recommendations that emerged from the global consensus reached at Cairo and reaffirms to the General Assembly its commitment to continue to advance and enhance the implementation of the Programme of Action and to take key steps to strengthen its implementation in the future. Proof of this has been the launching in recent years of national programmes on population, women, reproductive health, family planning and domestic violence.

Mexico's population policy is integral and multisectoral in its approach and is deeply humanistic in its conception. It reflects a sovereign decision made with full awareness of the present and a vision of the future. This policy is governed by the principle of unrestricted respect for the liberties and the rights of persons and takes into account our particular characteristics and our cultural values. The major changes that have taken place in the last 25 years have resulted in a true and silent demographic revolution. Since 1970, the average number of children per couple has dropped from almost 7 to 2.5. Life expectancy has increased from 62 to 75 years. Natural population growth has decreased from 3.3 to 1.8 per cent per annum. If a respectful, responsible and realistic population policy linked to the development process had not been put in place, Mexico would now have a population of more than 142 million, instead of the current population of slightly more than 98 million.

In the health sector, many important institutional, legal and administrative reforms have been put in place and there is the possibility of launching massive training in reproductive health. To give an idea of the magnitude of the efforts made, I wish to mention some indicators. In 1999, nine out of every 10 births were attended by medical and paramedical staff. Two clinics or health centres are built in the country every 24 hours. A broad set of actions is also being developed to ensure universal access to an increasingly broad range of integrated and high-quality reproductive health services, which are offered with full respect for the dignity of individuals and couples and the right to free choice.

These services rest on four essential pillars: family planning, perinatal health, sexual and reproductive health of adolescents and women's health. We continue to promote important institutional reforms so that the various substantive contributions to our approach to reproductive health are fully and truly incorporated into the operation of the services.

In view of the still high rate of unplanned pregnancy among adolescents and the prevalence of sexually transmitted diseases, including HIV/AIDS, we have redoubled efforts to satisfy the needs and requirements of this segment of the population in the field of sexual and reproductive health, giving priority to prevention. To give momentum to this mission, we are committed to strengthening efforts to institutionalize sex education in and out of the classroom. We are also committed to systematically and continuously reviewing its content in primary and secondary school curricula. Above all, we are committed to training and raising awareness of teachers and health workers, among other relevant agents.

Among the actions carried out in recent years, we wish to underscore the efforts aimed at including the gender perspective in the planning, design, implementation and evaluation of public policies; the unprecedented expansion of educational opportunities that today permits 92 per cent of girls between the ages of 6 and 14 to attend primary or secondary school; the recent distribution of 35 million copies of a new health tool called the National Charter of Women's Health; the reorientation of programmes of prevention and control of cervical, uterine and breast cancer; the multiplication of worker training and financial support actions to foster women's productive capacity, which has benefited 1.5 million women, especially those who live in rural and marginal urban areas.

All this progress is in response to a long-standing hope of Mexican society to promote full, equal and satisfactory participation of women in the social, economic, political and cultural life and in all the aspects of our country, including decision-making, on an equal footing with men. But in population and development there are many things yet to be done, many myths and obstacles to be overcome. In Mexico we recognize that the only guarantee for the achievement of the objectives and goals of our national programmes, adopted in the spirit of Cairo, lies in joint efforts between a Government that is representative of community interests and an organized, demanding, active civil society. The association between governmental institutions and social organizations, in an atmosphere that favours consensus-building and stable partnerships has become increasingly frequent, has shown significant progress in recent years and has provided beneficial experiences for both.

The international community has joined together to combat the combined challenges of demography, democracy and development. Joint efforts and the will to act jointly has also been characteristic of the process aimed at evaluating the implementation of the Cairo Programme of Action. The agreements that we reach on this occasion will be steps that enable us to continue advancing in the future, to better outline our common goals, to build new consensuses, to put in place innovative cooperation mechanisms, such as the South-South Initiative, in which we have participated actively, and especially to strengthen the ties that join United Nations Member States together.

The President (*spoke in Spanish*): I call on Mr. Agis Loizou, representative of Cyprus.

Mr. Filippi Balestra (San Marino), Vice-President, took the Chair.

Mr. Loizou (Cyprus): I have the honour to speak on behalf of the Chairman of the delegation of Cyprus.

My country has aligned itself with the positions expressed by the European Union, and supports them fully. In addition, we would like to make a few remarks regarding our national strategies and experiences on the issues concerned.

At the outset we would like to express our sincere gratitude to Ambassador Chowdhury for his effective and wise leadership during the work of the preparatory committee, as well as to Ms. Nafis Sadik, Executive Director of the United Nations Population Fund (UNFPA), for her valuable input.

The Programme of Action of the International Conference on Population and Development (ICPD) has been a valuable tool for policy-makers and planners on how population policies and programmes should be formulated and implemented. In essence, it moved away from standard population control policies to a more human-rights-based approach covering issues relating to sexual and reproductive rights, gender equality, the empowerment of women, *et cetera*.

Recent demographic changes in Cyprus include the drop of fertility to levels just below replacement, the increase of life expectancy to 75 for males and 80 for females, and the declining trend in population growth, at about 1 per cent per year. Population growth is due both to natural increase and to the positive net migration balance. The population is ageing; the proportion of elderly population aged 65 and over increased to 11.2 per cent in 1997, while the proportion of children below 15 decreased to 24.2 per cent. The working-age population is also ageing. Although ageing does not mean an old population, my Government is still worried about the problems that it involves, and in particular about its social and economic implications.

The population characteristics of Cyprus are the result of the satisfactory health, education, nutrition and sanitary conditions and human resource development prevailing in Cyprus and are thus based on public efforts and the priority placed on these issues by the Government.

In Cyprus the implementation of most of the measures included in the Programme of Action had begun long before ICPD, through the formulation of economic and social development plans. Due to its small size and its lack of primary resources, Cyprus's economic development rests on the full exploitation of its human resources. This objective forms an integral part of development plans and is in line with the overall objective of improving the level of social welfare, particularly that of women. For this purpose, the Government invariably assists the expansion and improvement of child-care facilities in order to assist women in seeking paid employment. It also provides vocational and other training for women, especially in rural areas, to enable them to engage in full-time employment.

Issues relating to gender equality and the empowerment of women also rank high among the priorities of my country. The Cyprus Government has taken measures to eliminate violence and discrimination against women. An important landmark in this context was the ratification by Cyprus of the United Nations Convention on the Elimination of All Forms of Discrimination Against Women, which provides the framework of current Government policy on women's issues. There is now legislation in force which provides for equal pay for equal work, guarantees maternity leave, prohibits the dismissal of women as a result of pregnancy, extends equal parental care to both parties, protects women from all forms of violence, safeguards the right of women to property and provides women equal rights with men with regard to tax matters. Also, the Cyprus Government has established the machinery required to promote women's equality and human rights.

In the field of education, girls enjoy equal opportunities with boys, while school curricula have been made more gender sensitive with the inclusion of relevant subjects, while sex education is taught at schools as a hidden subject. Education, which is provided free of charge, absorbs about 13 per cent of all Government outlays, while as a proportion of gross domestic product it reaches the 4.5 per cent level; both figures compare very favourably with those of developed countries.

In Cyprus, reproductive health is integrated into the primary health care system, and is provided free of charge by public-sector institutions and at affordable rates by the private sector. The total expenditure dedicated to health purposes, from all sources, is of the order of 6 per cent of gross domestic product, or 16 per cent of all public expenditure, which also compares very favourably with most developed countries.

All women have access to public pre-natal and post-natal care, including safe delivery, while the private sector is very active on pregnancy testing, ante-natal screening for sexually transmitted diseases including Hepatitis B and HIV-AIDS, safe delivery, treatment of infertility, safe abortion within the legal provisions and advice on contraception. Other services provided include cancer screening of the breast and uterus, and treatment for sexually transmitted diseases, including treatment for HIV-AIDS.

In Cyprus, family planning issues are entrusted to specialist doctors in the private sector, but more so to a non-governmental organization subsidized mainly by the Government. The services provided are not confined within the narrow meaning of population control, but also include access to information relating to sexual and reproductive rights, family law, sex education including health issues, reproductive choice and gender equality. It also provides counselling on sexual relations, abortion and, more recently, the prevention of HIV-AIDS.

The Programme of Action makes reference to issues of migration and problems associated with refugees and displaced persons. Article 49 of the Fourth Geneva Convention relative to the Protection of Civilian Persons in Time of War, of 12 August 1949, and articles 5 and 7 of the Statute of the International Criminal Court adopted in Rome on 17 July 1998 are unequivocal in holding that compulsory population transfers constitute not only internationally wrongful acts but also international crimes. Cyprus is a country which is witnessing the inhumanity of the refugee problem, since one third of its population has been displaced from ancestral homes as a result of the foreign invasion of 1974. We believe that the right of refugees to return to their homes and property in safety and dignity is an inalienable right based on international law and upheld by international jurisprudence and United Nations practice.

In the last two decades or so, Cyprus has been experiencing an inflow of Cypriot expatriates and their families, as well as an influx of foreign workers coming to work on a temporary basis. The return of Cypriot expatriates is actively encouraged by the Cyprus

Government in an effort to address the problem of an overall labour shortage. This has been made possible through financial and other incentives. During the last two decades Cyprus has also had the experience of transit migrants due to the war in Lebanon and, most recently, to the Gulf war of 1991. Cyprus, due to its small size and lack of absorptive capacity, cannot implement permanent immigration schemes. Hence, most illegal immigrants are either repatriated or sent to another country of their own choice, while some of them are accepted as genuine refugees and are given political asylum. In this regard, allow me to mention that Cyprus has ratified the 1951 Convention relating to the Status of Refugees and its 1967 Protocol. Also, my Government has initiated a dialogue and negotiations, at the bilateral level, on the signing of readmission agreements with some of its neighbours.

It is the view of my Government that action is urgently needed at the international level to establish a new code of conduct for managing migration, including the safeguarding of the rights of migrants, the prevention of trafficking in migrants and especially the exploitation of women and children.

I would like to conclude by saying that in its population policy my country is guided by the ICPD Programme of Action and has gone a long way towards implementing it. Even before ICPD, it devoted substantial resources to health, education and other social services. Due to its small population base, issues relating to population will continue to be a matter of great priority for Cyprus, in particular the fertility rate, the implications of population ageing, illegal migration, health issues and especially HIV-AIDS and gender equality. To overcome these problems, cooperation at the international level is necessary and should be actively promoted.

The Acting President: I now give the floor to His Excellency Mr. Jassin Mohammed Buallay, Chairman of the delegation of Bahrain.

Mr. Buallay (Bahrain) (*spoke in Arabic*): The delegation of the State of Bahrain is grateful to the President for convening this important special session. We wish him every success in guiding the work of the Assembly.

Bahrain recognizes the importance of population policy in preserving and improving the basic attributes and characteristics of a society, and population policy thus occupies a prominent place in our social and economic development plans. Broadly speaking, that policy is geared towards reducing mortality rates, influencing the birth rate and addressing problems resulting from the increase in the expatriate labour force.

The State of Bahrain attaches special importance to the question of population because of our profound belief that it is responsible for the promotion of development and for the advancement of the country. The State therefore never loses sight of the population question when it formulates development programmes and plans.

As population censuses are among the most important sources of information, the State attaches special significance to them, thereby joining with other States that have a long history of conducting censuses. The first census conducted in Bahrain took place in 1941, and that was followed by a series of censuses, culminating in the most recent one, which took place in 1991. The social, economic and cultural progress of the State of Bahrain in recent years is reflected in the development of its population censuses — the content and subject of such censuses, as well as the techniques used in collecting, processing and disseminating census data.

Bahrain is increasingly committed to development in its various aspects, and at all levels. Since the end of the first half of the century, the country has witnessed an important social and economic transformation. However, the State did not embrace a comprehensive development planning method or impose a particular schedule; rather, it adopted the simplified method of planning used in medium-term socio-economic programming. Given our limited human and natural resources, the limited market and the limited capital available for expenditure and investment, Bahrain used the annual regular budget as the point of departure for defining growth and development needs, the linchpins of which are the primacy of capital, construction projects and programmes, and social services.

Bahrain believes that population policies and goals are part and parcel of socio-economic and cultural development, the main aim of which is to improve standards of living. In the framework of its advanced policy of establishing new cities, therefore, the policy of the State of Bahrain is to broaden population planning so as to adapt residential communities to the circumstances of each family and to the requirements of socio-economic change.

The State is also seeking to improve standards of living and to fulfil the requirements of future generations.

Upgrading the capabilities and skills of the citizens is one of the outstanding results of efforts made by the State in the field of population and development. As a result, Bahrain has been highly placed on the human development index for the third year in a row. It is ranked first among the Arab States, and is placed forty-third internationally. In addition to this, we have developed programmes and services covering basic requirements such as education, health and training. Bahraini citizens participate in economic freedoms and enjoy privileges.

Bahrain's policy includes a combination of activities and programmes that contribute to the achievement of the political, demographic, social and economic goals of the State as they affect certain important population components, especially the size, rate of growth, geographic distribution and other aspects of the population. The formulation and execution of population policies in our country depends on the evaluation of the determinants of population variables. This cannot be achieved without the availability of diverse sources for population data.

The State of Bahrain is making efforts to provide working opportunities for Bahraini citizens in Government organizations. One such example is the announcement by the State of the establishment of a new oil refinery, which will provide 2,000 new jobs. The competent authorities have also introduced new laws to limit the use of expatriate workers in order to prevent them from competing with national workers. It has also established contacts with the private sector to recruit Bahraini citizens through the office of employment that was set up by the State.

The implementation of the recommendations of the Cairo Conference — one of the priorities of the State — is being effected through the efforts of all Government bodies and through their cooperation with one another as well as with non-governmental organizations and institutions. Furthermore, the high level of education among the members of society, especially among women, who are participating in social and cultural activities, has contributed to the prompt implementation of most of the recommendations included in the final document of that Conference. Like other States that have made great progress in this regard, we see no need to renegotiate the principles agreed to in Cairo or to reinterpret them.

I would like to reaffirm my country's support for the position of the Group of 77 in this regard. The State of Bahrain believes that the implementation of the recommendations included in the ICPD Programme of Action, and those included in the document to be issued at the end of this session, is the sovereign right of each country, consistent with national laws and developmental priorities, with full respect for the various religious and ethical values and cultural backgrounds of its people, and in conformity with relevant and universally recognized covenants and agreements.

My country also believes that it is necessary to implement those recommendations regarding universal education; universal primary health care; universal access to reproductive health care services, including family planning and sexual health, as indicated in chapter VII of the Programme of Action; the reduction of maternal and infant mortality rates; the extension of life expectancy; and a series of qualitative and quantitative goals that are mutually supportive and of critical importance to these objectives.

We are pleased that the five-year review of the progress in implementing the recommendations of the Programme of Action has achieved positive results, especially as it has resulted in numerous countries taking steps to integrate population concerns into their development strategies, which is of great significance.

Mortality rates in most countries have continued to decline in the five years following the Programme of Action. Bahrain believes that the final document of this session must be based on the results and conclusions of the governmental and intergovernmental reviews undertaken under the auspices of the United Nations, including the annual review and the five-year review undertaken by the Commission on Population and Development, and the meetings and records of other United Nations bodies regarding the progress achieved and the constraints encountered in implementing the Programme of Action.

In conclusion, I must state that the high rank achieved by the State of Bahrain in the field of social development, which is acknowledged in the relevant United Nations reports, is an affirmation of our intention to make every effort to take numerous, effective steps to achieve social development in the context of a specific country development strategy aimed at achieving socio-economic progress.

The meeting rose at 9.10 p.m.